

Stork Kind To White Mothers In Montgomery, Statistics Show

By DOROTHY WHITAKER

The stork was kind last year to mothers here in the Cradle of the Confederacy. *Jun. 6-27-48*

Fathers could hand out cigars proudly last year as no white mothers died and all white babies born were delivered in hospitals.

Dr. A. H. Graham, Montgomery County health officer, said Saturday that every registered white birth among city residents occurred in hospitals. He added that this is the first time in his memory that this has happened in a metropolitan area as large as Montgomery.

Statistics released by Dr. Graham showed that 93.4 per cent of registered births in the county were in hospitals. For the county as a whole, there were no maternal deaths among white mothers, although 2,385 babies were born.

He said that 17 per cent of Negro births were in hospitals. Six Negro mothers died in child birth, and 63 Negro and 34 white babies were still born.

Dr. Graham concluded: "Further expansion in clinic facilities, beyond the 208 clinic sessions now conducted at two clinic centers, requires the participation of a greater number of clinicians which has been assured us by the obstetricians of Montgomery and an increase in the staff of public health nurses on the staff of the Montgomery County Health Department. The Board of Revenue and City Commission have already recognized this need and have provided initial finances for nurse personnel when and if they can be secured." *Jun. 11-28-48*

6,056 Illegitimate Babies

Born in State Last Year

Atlanta Constitution
Atlanta, Georgia
Last year 6,056 illegitimate babies were born in Georgia, 793 of them in Atlanta.

In an article in the current Collier's magazine, Amy Porter, associate editor of the magazine, reports that the Vital Statistics Office in Washington has records on 95,000 such births in the United States in 1945.

Almost 50,000 of these births are to high school girls, and figures show that since the war's end the number is increasing slowly, not decreasing as authorities expected it would, she points out.

"Despite the many agencies of good will, unmarried mothers, as a group, get very little care," says

Miss Porter. Salvation Army homes, Florence Crittenton homes, and Catholic charities take care of some 18,000 such mothers a year, but that is pitifully inadequate compared with the figure of not less than 100,000 illegitimately pregnant women," she says. *Jun. 11-28-48*

However, many of these girls are now being aided by social agencies, public and private, which function on a case-work basis. Atlanta is one city with a social service organization that is doing a constructive job in taking care of these unwed mothers, according to Miss Porter.

During the past three years, the Family Service Society of Fulton and DeKalb Counties has given help to more than 700 unwed mothers, 142 of whom were nurse personnel when and if they can be secured." *Jun. 11-28-48*

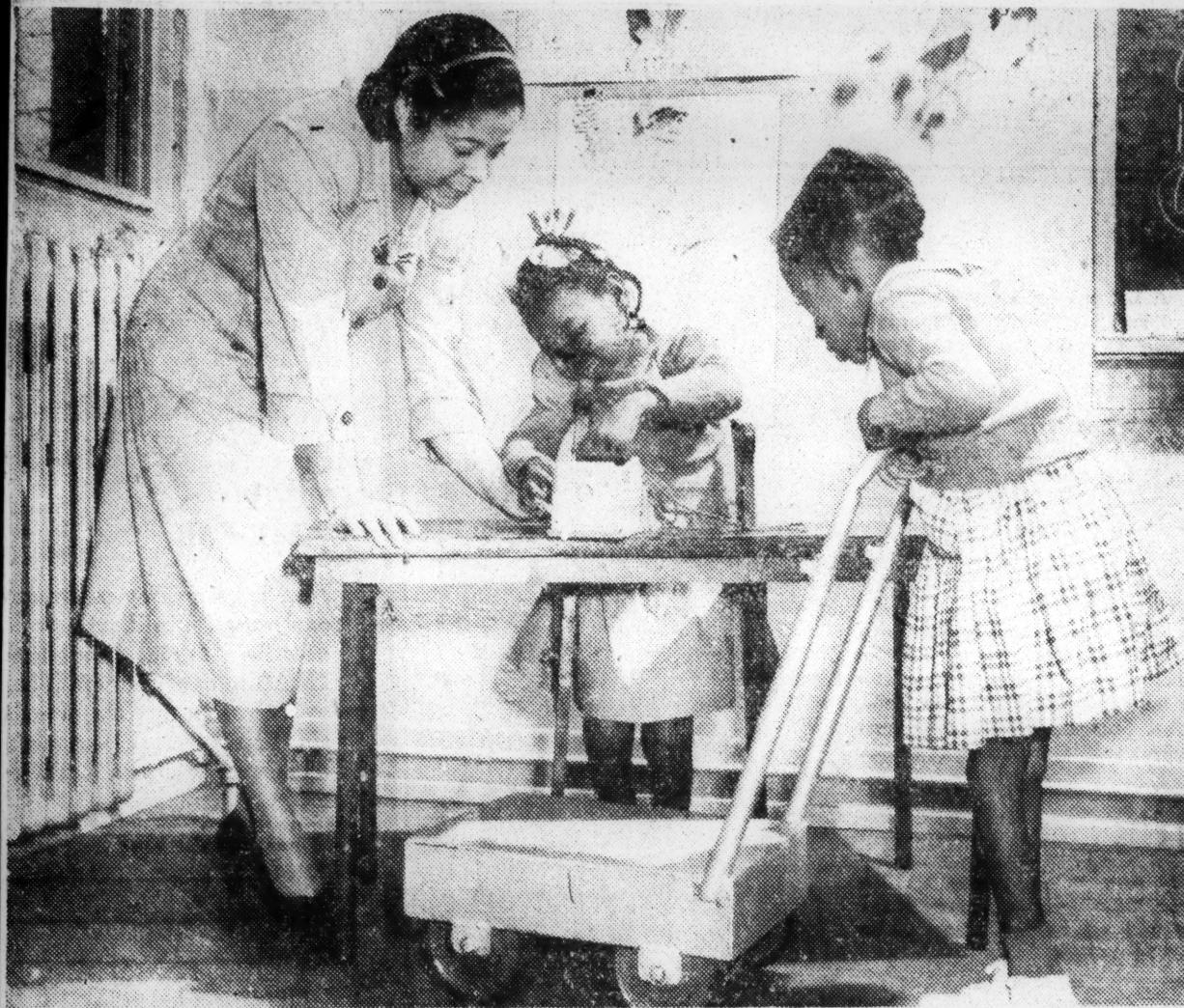
This Society is the largest private agency of its kind in the South. Its staff is composed of 18 case-workers professionally trained in psychiatry and social work. It serves as the intake agency for the local Florence Crittenton Home, and works closely with the State and County Welfare Departments and the Child Welfare Society.

"Our primary concern is the rehabilitation of the girl," says Miss Angela Cox, Executive Director of the Society. "We stress confidentiality. We don't blame or judge, and we don't give advice. We help the girl to decide for herself what is best for her and the baby." *Jun. 11-28-48*

About one-third of the girls go to the Florence Crittenton Home, but individual plans to suit the

year, 5,317 of the births were to Negroes. *Jun. 11-28-48*

The State Department of Vital Statistics here in Georgia feels reasonably sure that a large number of illegitimate births are covered up, especially by white people. The majority of Georgia's illegitimate births are among Negroes. Of the 6,056 reported last



LEARNING TO HELP SELVES—A typical scene in the new class for cerebral palsied Negro children at Slossfield Center. First of its kind in the South, the project is a joint endeavor of the Birmingham Board of Education, the Alabama Crippled Children's Service and the U. S. Children's Bureau. Teacher Brunetta Hill is helping these two little girls learn to walk, as well as to learn their A, B, Cs.

Little Lives Made Brighter By Service Here

News are needed
BY ALYCE BILLINGS WALKER
News Staff Writer

This is the second chapter of an Alabama story that began in 1926.

It's the story of success and failure, of hope and despair. It's about children.

But they aren't the usual children. They are the seven out of every 100,000 population who have cerebral palsy. Their number is second only to those who have infantile paralysis.

Cerebral palsy, popularly but erroneously called spastic paralysis, is a condition in which muscular control is damaged or lost. The disability may be severe or mild. The lack of control may be anywhere in the body. The speech and hearing mechanisms may be damaged.

Faulty obstetrics is commonly blamed for the condition. This, too, has been proved erroneous. Damage to the muscle centers in

the brain may be due to a number of causes before or after birth.

Roughly, these children are divided into two groups. The athetoid or extrovert type are those whose involuntary motions are superimposed on voluntary motions.

The other is the spastic type who suffers from muscle spasms which produce "mass" motions of whole sections of the body.

Of every seven cerebral palsied children, surveys show one dies before the age of 4 to 6 years. Two will be feeble-minded and require

THIS KNOWLEDGE was the starting point of the story back in 1926. When the Crippled Children's Service of Alabama was launched that year as an orthopedic service, cerebral palsied children were covered, because the condition has orthopedic aspects.

As the Service established its diagnostic clinics over the state, these children, along with those suffering other afflictions, were given attention. Indeed, their screening is very carefully done lest any of those "four out of seven" be missed.

Meantime, a Birmingham pediatrician became particularly interested in treatment of cerebral palsied children. He established a small, private school for white children in 1936.

The State Service began that same year boarding children in the school. Today, there are 17 of these state wards there. They are the ones who showed during examination most possibility of progress.

Some require only six to eight

months to develop enough ability in

speech and muscle control to be able to attend public school. Others are kept as long as two years.

At the same time children are being treated and trained, parents become familiar with methods used to help them learn control of muscles. When children are discharged, an orthopedic nurse from the State Service visits them at home to check on their progress. Home equipment for walking and standing training is available to these state-supported children.

A FEW WEEKS AGO, the second chapter of the story began. It was the opening of a day school at

Slossfield Center here for Negro children with cerebral palsy. First of its kind in the South, it is being financed by the Children's Bureau. The academic teacher is selected by and is under direction of the Birmingham Board of Education. Her salary, however, is paid by the State Department of Education from a fund built for crippled children by local state and

The teacher, too, has the counsel and direction of a medical consultant. Lines are out for physical and occupational therapists to contribute to the program.

The children use four rooms. The classroom is equipped with parallel walking bars, push carts, specially constructed desks and other items for muscle development and comfort. There are boxes at the corners of the sand table. They support little backs so hands can reach for toys. The children have lunch and their afternoon nap at the school. Because it is state supported, it is open to both county and city school children.

This class and the boarding school are parts of the web of services planned for the known 2,500 cerebral palsied children in Alabama. The Mobile Junior League is considering sponsoring a school as its major project.

THE GOAL: To help cerebral palsied children help themselves, to decrease their tragic and sometimes total dependence on others, to lessen the burden of those who love them.

It's an expensive program. These cases require attention of a pediatrician, orthopedist, psychologist, physical therapist, psychiatrist, speech therapist, occupational therapist, neurologist. But, they are human beings who deserve a chance at happiness and useful lives.

Their progress seems slow to unknowing observers. They can't be judged by the usual yardstick of accomplishment.

A statement by Brunetta Hill, the Sloss-Sheffield teacher, justified all the money, effort, medical knowledge and patience being poured into the program.

Said she: "These children try so hard to use everything that has been left them. Every little accomplishment brings them such joy. I don't think I'd have patience enough to work again with normal children who waste so much of their energy and talents."

This summer Miss Hill and Mrs. Hutchinson will take a six-week course at Michigan State College in the field of cerebral palsied education. Their full expenses and tuition will be paid by the State. You get another view of the activities in the above scene. On Jan. 26, 1948 the class opened with eight pupils and with Miss Brunetta Hill as instructor. There are ten pupils in school now with two classes. Ages range from 4 to 12, with the exception of a 16-year old girl. *Jazzy* *May* *and* *Carol*

This is really a "little school" within itself. There are two classrooms, a rest room, kitchen and office. Meals are prepared at the other school and sent to the pupils who are served in their rest room-dining room.

Birmingham Inaugurating Classes For Cerebral Palsied Children

By EMORY O. JACKSON

(First Of A Series)

BIRMINGHAM, Ala.—(SNS)—Birmingham has registered another first—the first city of the nation to place in its city schools classes for cerebral palsied children.

Two classes seeking to restore children handicapped by cerebral palsy are established at the Lewis School of which Prof. W. J. Moore is the principal. The two classes are located at the Slossfield Health Center.

There are a nurse and a maid. Mrs. V. Richardson is the nurse. Nurses are employed to transport the pupils to and from school.

In addition to the nurse and teachers, the children get instructions from specialists in medicine and subject matter. For instance, college professor who knows the field assists with teaching speech. Specialist in the field of cerebral palsy contributes his services in working with the children.



(Picture by courtesy of Birmingham News-Age-Herald)

In the scene above you get a glimpse of the work that is going on in the school. *Daily World*

19 1943

General

The Negro Health Problem *The Courier Journal* To the Editor of The Courier-Journal:

We issued through the Urban League in 1939 a statement regarding the purposes of the Jefferson County Sunday-school Association in the field of health. Our statement at that time is backed up by an article in the Saturday Evening Post of January 24 by Henry F. and Katherine Pringle. The article states, "The widespread notion that Negroes, as a race, are especially prone to disease is no longer held by any competent scientist. Negroes get sick because of poverty and neglect, exactly like all the members of the human race. Generations of bad housing, improper food and economic insecurity do not produce hardy men and women, but there is no proved racial susceptibility. More Negroes get tuberculosis and pneumonia, contract venereal disease and other ills because in the main they live under worse conditions and because they do not receive adequate medical care."

About 15 years ago there were about 85 Negro doctors in Louisville. That number has been decreased by disability and death. The present number is about 30. There are only 4,000 Negro doctors practicing medicine in the United States as compared with 176,000 white physicians, and it is estimated that 5,300 more are needed to care for the increasing Negro population.

"One important reason for the acute shortage of Negro doctors," declared the recent report of the President's Committee on Civil Rights, "is the discriminatory policy of our medical schools in admitting students."

As a teaching institution, General Hospital falls into this category. Provision is made for nurses' training and for the training of internes for whites, but no provision is made for Negroes in spite of the fact that 50 per cent of the space is used for their treatment. We therefore ask that Negro doctors be admitted as internes and that Negro women be given nurses' training.

DANIEL J. HUGHLETT, Executive Secretary,
Jefferson County Sunday-School Association

Louisville. *Journal*, May 1-28-48

HEART DISEASE NO. 1 MENACE TO RACE'S HEALTH

NEW YORK—How's your heart? Do you know that heart disease is the No. 1 killer of Americans, including Negroes? This fact was pointed out this week by the American Heart Association, as it launched its nationwide educational campaign and fund drive.

Contrary to the popular belief that tuberculosis is the leading cause of death among Negroes, statistics reveal that diseases of the heart top the list.

Since 1928 heart disease has killed more Negroes than any other disease, says recognized Negro medical authority, Dr. Herman Julian Lewis, associate professor of pathology at the University of Chicago, in his book "The Biology of the Negro." This has been true for white people since 1912, he states.

Brookhaven City
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pamphlets, leaflets, and articles relating to the health of the Negro has been set up here. Co-operation has been received from individuals and organizations who have added to the file on Negro health which it is felt will serve as a refresher source for those interested in Negro health and medical care in the United States.

SAVING LIVES

The Negroes
It is a sad fact that the life-span of the average colored American is ten years shorter than that of the average white.

Health authorities are agreed that this difference can be attributed to the conditions under which Negroes live and the lack of adequate health facilities.

When one studies these facts the true criminal character of racial discrimination is laid bare. A decade out of each life is sacrificed on the pagan alter of racism.

The report of the President's Civil Rights Committee gave emphasis to remedial measures which must be taken now to stop the murderous course of bigotry. It is important that we conserve human lives as well as the soil and forests of our great country.

We were gratified last week to learn that some action is being taken. The color barriers which closed the doors of Washington's Gallinger Hospital to Negro medical personnel have fallen. Jim Crowism is no where more damaging than in the hospitals and this criminal situation should have been abolished long ago.

We are also encouraged by the gallant fight now being waged by New York's Sydenham Hospital which is celebrated for its interracial policy. Deep in financial difficulties, Sydenham has launched a daring, new plan to expand its plant and staff and to achieve stability.

The new Sydenham Institution Fellowship is a program which seeks to enlist a million citizens for the support and expansion of the medical services of the interracial hospital. Vast sums of money are required to implement the Sydenham program and \$7,500,000 has been suggested as a The plan has already met with enthusiastic response in New York and we believe that it will succeed. Sydenham has weathered its so-called ex-

perimental stage as an interracial institution and it must make advances.

These recent developments should inspire Negroes and whites all over the country to tackle the tremendous problem of health among our citizens. Racial barriers must be lowered and we must make our contributions to the building of greater health centers. It can be truly said, unless something is done our lives are at stake.

Gotham's King Crowns Queen Of Health



These are Gotham's king and queen of health. The two healthiest specimens were chosen from among entrants from seven centers of the Children's Aid Society in New York City. They are Rosalind Reeling, 5, of 2225 Fifth avenue, and Michael Tammany, 4, of 402 West 38th street. The young king is shown crowning his queen here. *Journal*, May 5, 1948

RESEARCH EXPERTS ATTACK BROOKINGS HEALTH REPORT ON POINT OF NEGRO HEALTH

NEW YORK (AP)—Two research experts sharply criticized the recent Brookings Institute report against a compulsory health program in the United States, the Committee for the Nation's Health revealed here this week.

One of the main points criticized was the report's conclusion that the American Negro's lower health rate than whites should be blamed not on economic status, but on "personal habits," "hereditary factors" or "the way of life of the people."

The Brookings report was attacked by Dr. Michael M. Davis, chairman, Committee on Research in Medical Economics, and Dewey Anderson, director, Public Affairs institution.

Their findings are published in a 17 page report, "Medical Care for the Individual," printed for the subcommittee on health at the request of Sen. James E. Murray and Sen. Claude Pepper of the senate committee on labor and public welfare.

Speaking of the Brookings report on racial health, Frederick E. Robin, executive secretary, Committee for the Nation's health, said:

"Should the Brookings 'findings' stand unchallenged, they will become additional ammunition for those who oppose adequate medical care for all regardless of race, color or creed."

In attacking the Brookings theory on the health of the races the Davis-Angerson report points out that the Negro race and other low income groups cannot afford to pay the high cost of medical care. The main causes of many of the nation's health problems is usually economics, not heredity or personal traits as such, the study declared.

This new study brings out problems of public insurance as well as the good points of such a program. It points out that a compulsory health program will not regiment doctors, nor will patients be forced to take doctors picked for them by the government.

It is also argued here that such a program would enable lower income groups to get more adequate medical attention and health facilities.

The Committee for the Nation's health is one of several organizations supporting a national health insurance program. Other groups backing the program include: the AFL and CIO, National Farmers union, NAACP, American Veterans committee, YMCA, National Association of Colored Graduate nurses, National Dental association, Physicians Forum, National Urban league, National Medical association and Council on Christian Social progress of the Northern Baptist convention.

RHEUMATIC FEVER HITS NEEDY MOST

NEW YORK—More of the Negro population, especially the lower economic groups, it is reported by the American Heart Association, which is now conducting its Annual Drive by a cold or sore throat, the Association advises. Among its recognizable symptoms are loss of weight, daily slight fevers, discomfort in the heart, and more than one-third of the crippled hearts in

the arms and legs, and especially in the joints. The pains accompanying it may be mild and are often mistaken for "growing pains."

Adults are warned to watch for the symptoms in children and send them for medical diagnosis and treatment at once. Pain accompanying rheumatic fever often occurs elsewhere in the body in the stomach and regions of the heart.

Chorea, commonly called St. Vitus' Dance, is also a symptom of this dangerous disease. Teachers are warned to be on guard for muscular jerking in children, which is often attributed to nervousness.

Mental Hygienists Seeking Brain 'Cyclotron'—to Smash Prejudice

(The Associated Press) London, Aug. 16.—The mental hygienists today set themselves the task of building an "intelligence cyclotron"—a sort of brain smasher—to destroy international prejudice.

The idea was put forward at the International Conference on Mental Health by Dr. Frank Fremont-Smith of New York, vice-president of the International Committee for Mental Hygiene. He summed it up this way:

"Just as the physicists, chemists, engineers and mathematicians needed to collaborate in order to build the cyclotron for the release of atomic energy, so must we, the specialists in individual and group behavior, join forces to forge a different kind of cyclotron.

"It would be one that will use the powerful rays of human intelligence to penetrate the tough outer shell of suspicion, prejudice and hostility, and thus release the untapped energies of goodwill and co-operative effort which lie in the human heart."

Dr. Fremont-Smith said a confused and troubled world is looking to the mental hygienists to mobilize the knowledge of social scientists "to promote mental health and harmonious human relations and thus to provide a basis for enduring peace."

Heretofore, he said, the principles of mental health have not been brought to bear upon the crucial problems of the world. New knowledge of human behavior is available, but without the guidance of social scientists it results in suspicion, prejudice and hostility, he said.

"It is this new knowledge of human personality—new knowledge not yet put to work—which justifies our hopes," he told the conference.

Viscount Addison, Britain's lord

privy seal, echoed Dr. Fremont-Smith's views when he said it is a question whether the human mind and will are prepared to face the responsibility for the use of forces which physical science has made available.

Florida Tops In Health Service

JACKSONVILLE—Florida leads the nation in the percentage of people who are within reach of public health service, according to latest reports. This statement was made here this week by Dr. William T. Sowder, State Health Officer, in his review of the State health department's progress last year.

More than 97 percent of the people of this State are covered by local public health service, while the national figure is only 65 percent, he declared.

19 1948

General

Psychiatrists to Attack International Prejudice

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Public Health Nursing Week Opens April 11

April 8-17
The *Dependable*
Chicago *all*
April 8-17 as National Public Health Nursing Week, the State Nurses association this week took occasion to explain the functions of the public health nurse in her community.

The public health nurse, the association states, serves approximately four million families each year, teaching them the principals of healthful living and bringing individuals in contact with the medical resources of the community.

Set 43-98
Not a charity, public health nursing is a community service contributed by various government and voluntary agencies. The service extends into the school, industry and health departments and provides visiting nurse associations for the convenience of home residents.

At present the estimated number of additional public health nurses is 7,000. By 1960, there should be 76,700 or one for every 2,000 persons, it is estimated. At present 42 million hours of nursing service are given yearly, but if adequate health protection is to be given the nation, says the nurses' association, a great many more hours are needed.

Atlanta Negro Health Status

1948 Daily World Atlanta, Ga.

Improved, Urban League Finds

Wed. 2-4-48
A report on HOSPITAL CARE OF NEGROES IN ATLANTA was released recently by the Atlanta Urban League, a Red Feather agency for social service among Negroes.

According to the Report, the Negro population of Metropolitan Atlanta estimated in April 1947 by the Bureau of Census to be 143,000 or 29 percent of the total population, through in the city of Atlanta, the Negro population is 34 percent of the whole.

By any of the measures used to determine the health status of the Negro population there has been improvement during the past ten years.

Since 1940, there has been a surplus of births over deaths.

The Negro infant mortality rate has been reduced by more than 50 percent during the ten year period.

The Negro maternal death rate has decreased from 5.45 per 1,000 births in 1936 to 2.11 in 1946.

The death rate for Atlanta's Negro population has declined from 22.32 per 1,000 population in 1936 to 13.02 in 1946, but the death rate for Atlanta Negroes is higher than the rate in thirty other cities with which Atlanta was compared.

On the basis of the same measures the health of Atlanta's Negro population compares unfavorably with that of the white group.

The Negro infant mortality rate, despite the decline in the rates for both groups, is twice as high as the white.

The maternal death rate for Negroes is five times as high as the white maternal death rate.

The death for Negroes in Atlanta is approximately twice as high as the white death rate, and the Negro population are reflected in the all leading causes of death except cancer.

The limitations in existing facilities for the hospital care of the Negro population are reflected in the prevailing health level of Negroes.

In Metropolitan Atlanta, there are 1,850 general hospital beds or 4.3 per 1,000 population. The standard of the United States Public Health Service is 4.5 beds per 1,000 population.

However, only 391 or 2.8 per 1,000 of these beds are available for Negroes. In order to approach the national standard, a minimum of 248 additional beds for Negroes is needed in the community.

At present, only the municipal hospital, and three small proprietary hospitals admit Negroes. The municipal hospital, for the care of the indigent, has 300 beds for Negro patients. At least half of the Negro population have incomes which make them ineligible for admission to the municipal hospital.

HANDICAPS NOTED

The Report points out that none of the hospitals which are approved for post-graduate training of physicians admit Negroes to these training opportunities. The municipal hospital is approved for 110 interns and residents, and the "colored side" is utilized for teaching purposes, but Negroes are not included as interns or residents on this staff.

It is pointed out that the limited facilities for hospital care, the absence of postgraduate training opportunities handicap Negro members of the medical profession and deter those who might otherwise choose to practice in Atlanta. There are 37 Negro physicians or one to each 3,368 persons as compared with the accepted standard of 1 to each 1,000 or 1,500.

The Report concludes that the health of the Negro population is directly affected by the limitations described and that the health of the whole population is affected by the health of the Negro third.

In an estimate for community planning, the Report points out the possibility of federal assistance through the Hospital Survey and Construction Act (Public Law 725, 79th Congress,) if local funds can be raised to meet this pressing need.

U. S. Life Span Now 67,**But Women Outlive It**~~Washington, D. C.~~

WASHINGTON, July 25 (UP).—On the average Americans now live to be sixty-seven, but the women are doing even better than that, the Federal Security Administration reported today. *Mon. 5-9-48*

Oscar R. Ewing, administrator, said white women now have a life expectancy of 70.3 years, "exceeding the Biblical three-score-and-ten for the first time in the history of the nation." White men can expect to live only 65.1 years. *7-26-48*

Life tables for 1946 show that the average life expectancy of Americans increased nearly a full year over 1945 and nearly two years over the 1939-'41 period.

The average longevity of non-white persons is sixty-one years for women and 57.5 for men. However, Mr. Ewing said, the improvement between 1945 and 1946 was greater for them than for the white population. There has been a narrowing of the race differential since 1900, he added. *7-26-48*

He said the increase in life expectancy was largely the result of improved control of infectious diseases. *Desalvado T. Fisher*

LIFE'S SPAN INCREASES~~Commercial Appeal~~**Expectancy For White Girl****Babies Now 70.3 Years**~~Commercial Appeal~~

WASHINGTON, July 25. (AP)—White girl babies born now can expect to live at least 70.3 years, the Government calculated Sunday.

It's the first time in the country's history that the life expectancy rate has gone past the Biblical "three score and ten," the National Office of Vital Statistics said.

Nonwhite babies have the chance of living at least 65.1 years, the agency estimated. *7-26-48*

White boy babies can expect to live on the average 65.1 years, while nonwhite boy babies have an expectancy of 57.5 years.

All in a Lifetime*Dayton Daily*

The white female of the United States now has a new lease on life. White girl babies born today can hope to reach the age of 70.3; boys, 65.1. *Mon. 5-9-48*

This new mark of longevity, which sets the average length of life of all people at 67 years, was reported last week by Federal Security Administrator Oscar R. Ewing. The statement is based on vital statistics for 1946, latest year for which figures are available from the National Office of Vital Statistics of the Public Health Service.

The life expectancy of a baby born today is almost a year longer than if he

or she had been born in 1945, and nearly two years more than if born in the years 1939-1940. *Mon. 5-9-48*

The number of years left to a child of 10 today depends both upon sex and race. White boys on the average will live another 58.3 years; white girls, another 63 years. Non-white children usually do not live as long, boys averaging another 51.9 years, girls another 54.8 years.

Young men of 20, if white, have an average remaining life of 49 years; girls, 53.4 years. Men of 40 may expect about 30.9 years more of life; females, 34.8. White men of 60 on the whole have 15.6 years more to live; women of the same age, 18.1 years.

For those who reach 65, non-whites have a longer average span left them than whites. At 65 and 70, this difference amounts to but a few weeks or months. But for those who reach 75, it amounts to a year or more. *8-9-48*

White men of 75 may expect to live another 7.7 years, white women another 8.6 years; non-white men on the average have left to them the same number of years as white women, and non-white women may expect another 10.5 years.

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17-PAGE REPORT

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INSURANCE PROBLEMS

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Dr. Louis Wright Hails Federal Health Report

Says Plan, If Endorsed by Congress,

Will Benefit Low Income Citizens

NEW YORK — The report "written hospitals without discrimination as to race, religion or sex." "The Nation's Health," submitted to President Harry S. Truman by 2,000 physicians, the report as Oscar R. Ewing, Federal Security Administrator, this week, was in our society a system of medical care under which colored physicians and patients are discriminated against. There should be no racial barriers in the provisions of adequate medical care.

The 186-page report reviews the health status of the American people, points up the deficiencies, urges remedial action and recommends a comprehensive government health insurance plan and annual Congressional appropriations of \$150,000,000 under an amended Hospital Construction Act to assist localities in the building of new hospital facilities.

The objective of the health program, the report maintains is "to assure for every individual his utmost degree of health, through providing complete health and medical services to everyone in the nation; to do this for every man, woman and child, without regard to his race or religion, the color of his skin, his place of national origin or the place he lives in our land, and without regard for his personal economic status."

The report recommends: "That all maintenance subsidies to hospitals be assured only on condition that professional personnel should be accepted as staff members, or as workers, in the under-

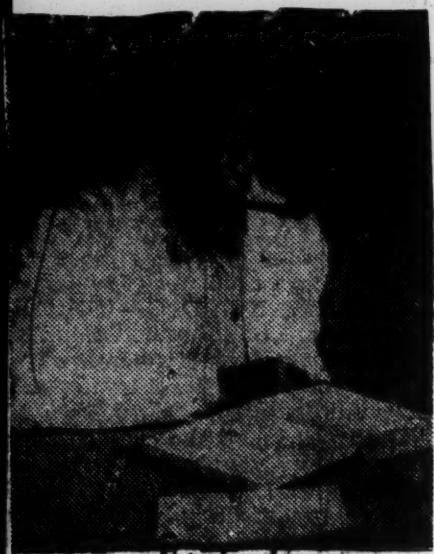
Will Help Masses

Dr. Wright, surgical director of Harlem Hospital and a fellow of the American College of Surgeons, expressed the opinion that this report "is the first recognition of the importance of health as it relates to all the people by responsible agents of the government. It is, in fact, a document of historic importance."

"The recommendations of the Federal Security Administrator for a national health insurance program offers a sound and feasible plan for improving the health of the nation. Only under such a plan can the masses of colored citizens and other low-income groups improve their health so that they may contribute their maximum efforts to the nation's economic development."

19 1948

Public Health Service

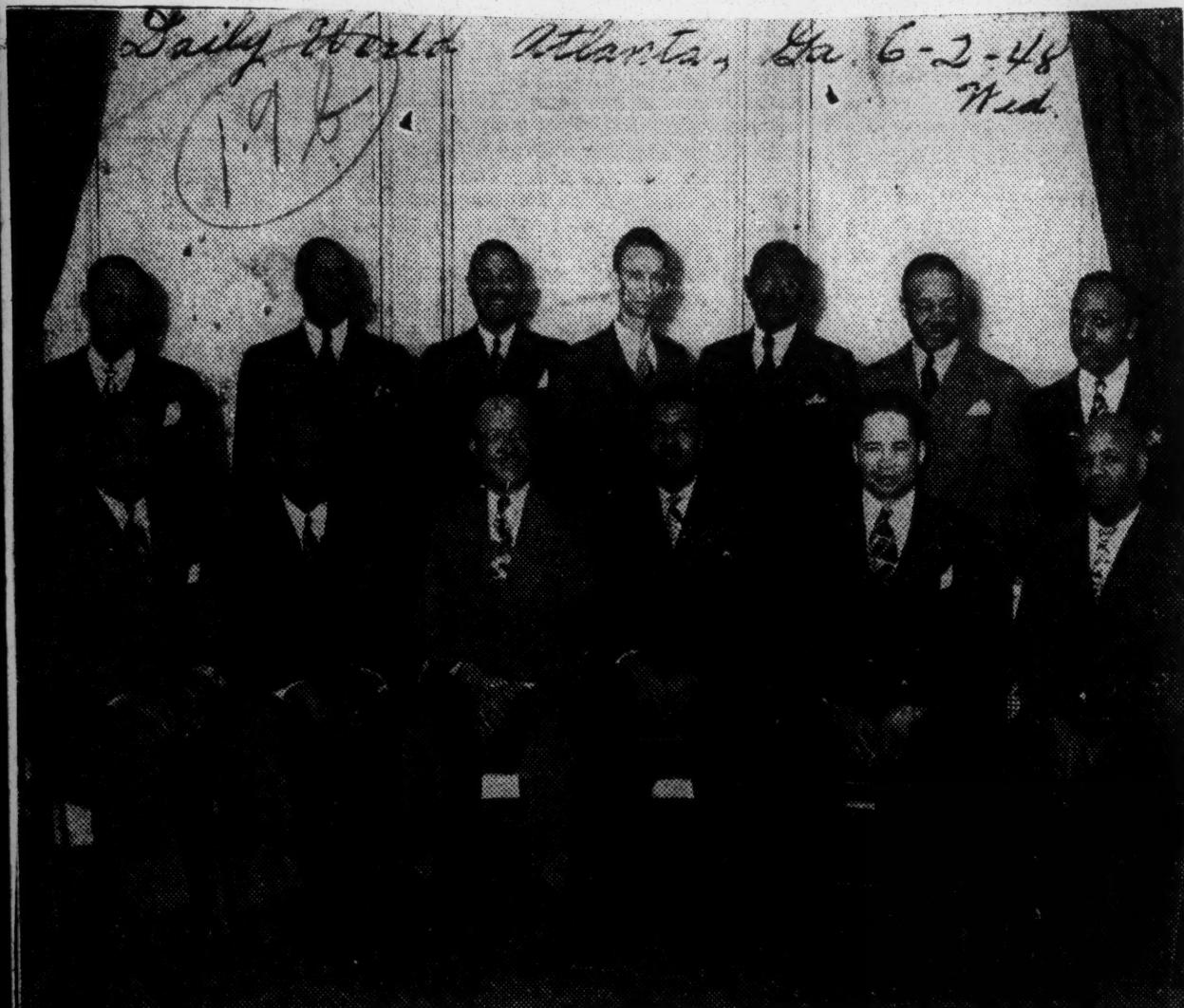


19 *July 1948*
GEORGIA CONSULTANT—Dr. W. A. Mason, of the U. S. Public Health service and former faculty member of Meharry Medical college, Nashville, who has recently been assigned consultant for public health in Georgia. From his headquarters in Atlanta, he will work out public health programs for schools, colleges and local health departments throughout the state. —(ANP)

Cancer and Heredity!

New York—Regardless of race or color, cancer has NOT been proven hereditary, says the American Cancer Society, in a statement this week. "But play it safe," the statement continues, "Doctors say. If your parent died of cancer, or if this disease is frequent in your family, then you should be alert, cautious and intelligent in detecting and reporting any sign or symptoms of cancer in your own body."

*the American
Cancer Society
Thurs. 29-48*



Dr. Dixon will serve as president for one year. He succeeds Dr. Walter H. Wright, dean of dentistry, New York University.

Daily World
DENTIST HOSTS — These are the Officers and Committee Chairman of the Commonwealth Dental Society, Newark, N. J., the Host Organization to the National Dental Association's Convention August 9-14 in Newark, N. J. This local Society plans to entertain 700 dentists plus their wives, children and visitors, which means that up to 1,000 people are expected to be in attendance at this yearly meeting. Convention Headquarters is New-

ark School of Fine and Industrial Art and the local President is Dr. J. H. Jones. With Dr. E. W. Taggart, Birmingham, Ala., National Dental Association President.

mittee; Dr. C. E. Bomar, General Chairman; Dr. J. B. Parks, Chair- fluoride properly applied to a man, Entertainment Committee; Dr. J. E. Watts, Chairman, Clinics Committee, and Dr. W. T. Harper, Assistant General Chairman.

learn first hand tonight how sodium fluoride properly applied to a child's teeth can effectively prevent decay.

A group of the dentists will meet at 7:30 tonight at Washington Elementary School to see actual demonstrations and films about the process.

Sponsored by the U. S. Public Health Service, the portable equipment will be used tonight to demonstrate its use on the first Negro children in the city.

Previously a dental unit of the same type was at Powell and Boys Industrial School.

Dr. Eugenia L. Mobley, in charge of Negro Public Health Service in Jefferson County, will give an introductory talk about the history and powers of the tooth-saving chemical. Children from the Washington School will be used in the demonstrations.

DR. RUSSELL A. DIXON, dean of Howard University school of dentistry, became the first Negro to hold a top position in the 14-year-old Pan-American Odontological Association, when he was elected president at the annual dinner of the organization, held in the Pennsylvania Hotel, New York City, Thursday.

Boycotted Dental Labs End Jim Crow

WASHINGTON — A two week old boycott of the S. S. White Dental Manufacturing company and the W. A. Lockwood Dental company, by the Robert T. Freeman Dental society was brought to a satisfactory end here last week when the companies gave assurance that Negro dentists would not be subject to discrimination in the future. The boycott had been in protest of a course for dentists' assistants, sponsored by the companies, to which only white persons were admitted.

**Negro Dentists Will
Get Treatment Tips**
Birmingham Negro dentists will

Health Conference Blasts AMA

**Calls for Anti-Trust Action;
Asks Health System for All**

Denver, Colorado
5-1948

The Farmers Union First National Health and Insurance Conference was held at Brook Forest, Colorado, April 26-28. Delegates to this historic gathering drew up and unanimously adopted a statement setting forth their views on America's health problem. They also called attention to one of the biggest obstacles facing the Farmers Union and other groups who attempt to ~~set up~~ cooperative medical projects.

Here is the statement adopted without dissent at the conference:

"America can afford a health system which will provide complete preventative and curative care for every person in the United States. She cannot afford less.

"Such a system should include public health adequately financed to provide every citizen with preventative protection to wipe out contagious and communicable diseases. It should include clinics, district hospitals, regional hospitals and great medical centers where the most modern and highest types of medical knowledge and skill can be made available to every citizen in need of such services.

"America can have health services and facilities in abundance.

"The adoption of such an adequate system of medical care and health service in the United States is being blocked primarily by a handful of men who have imposed a stringent scarcity philosophy on medical practice through the American Medical Association.

"Although once convicted of violating anti-trust laws, the American Medical Association is now more energetically restricting and preventing adequate health care for American citizens than ever before in its history.

"It sponsored legislation passed in 33 states to prohibit the establishment of health care associations except by members of its closed shop organization. It maintains restrictions on training and licensing, resorts to pressure against publicly-minded members of its own profession, and aggressively works to exclude lay people from effective participation in health committees, commissions or other activities in order to prevent health services becoming abundant in the United States.

May 1948
"We call for abundant health care in the

United States. We pledge ourselves to the most vigorous support of every step in this direction.

"As a beginning, to clear the path to the development of such a program, we call upon the President and the Attorney General of the United States to extend the present inquiry by the Federal Bureau of Investigation into conferences working out the ways of obtaining decent medical care to an investigation of the monopoly activities of AMA members at Williston, North Dakota, and at Salem, Oregon, and any other places in the United States where cooperative and community health efforts are being opposed, and to renew prosecutions of the AMA, its affiliates or members."

State Medical Unit Asks Action To Prohibit Ban on Negro Doctors

New York, N.Y.
Wed. 5-19-48

By WILLIAM JONES
The House of Delegates of the Medical Society of the State of New York adopted yesterday without a dissenting vote a resolution urging a change in the constitution of the American Medical Association designed to prohibit county medical societies throughout the country from excluding Negro physicians from membership.

The House of Delegates, which was holding its 142d annual meeting at the Pennsylvania Hotel, is the policy-making body of the State Medical Society and is made up of representatives of the sixty-one county medical societies in the state. It has a membership of 22,000 physicians and surgeons.

Next to the American Medical Association, the Medical Society of the State of New York is the largest medical body in the country.

Dr. Samuel Bennett Burk on behalf of the Medical Society of the

County of New York, asks for the introduction of a clause in the constitution of the A. M. A. reading:

"No component society of the American Medical Association shall exclude any qualified physician from its membership by reason of race, creed or color."

A similar resolution, slightly different in wording, demanding that "no constituent association shall exclude from membership any physician for other than professional or ethical reasons," was introduced on Monday by Dr. J. Lewis Amster on behalf of the Medical Society of Bronx County.

Dr. Amster agreed to the wording in Dr. Burk's resolution and the House adopted it by a voice vote.

The resolution previously adopted by the New York and Bronx County Medical Societies, is the first of its kind to be adopted by any State society. It was therefore regarded as a significant step toward removing the present barrier against Negro physicians in seventeen states and the District of Columbia.

As the resolution pointed out, to

be a member of the American Medical Association and of other national medical organizations, as well as of a state society, a physician must first become a member of his local county society. Exclusion from membership in the AMA also automatically bars a physician from being certified as a specialist by the various national certifying boards.

"The exclusion of physicians from membership on the basis of races," Dr. Amster's resolution said, "constitutes an affront to our colleagues, a degradation of the honored tradition of our profession and a violation of our American democratic ideal."

The House of Delegates also voted to introduce the resolution at the next annual meeting of the House of Delegates of the American Medical Association, to be held in Chicago next month.

Tests with fifty-five experimental diets on the effect of low caloric and water intakes on protein metabolism, made with 200 volunteer conscientious objectors and Army enlisted men, were described by Dr. David Schwimmer and Dr. Thomas H. McGavack of the Metropolitan Hospital and the New York Medical College, Flower and Fifth Avenue Hospitals.

Dr. Howard A. Rusk, Professor of Rehabilitation and Physical Medicine, New York University College of Medicine, and associate editor of THE NEW YORK TIMES, discussed "Dynamic Therapeutics in Chronic Diseases."

One of the most significant advances made in rehabilitation during the war and the immediate post-war period, he said, "has been the increased recognition given to medical rehabilitation as an integral part of medical care."

"We, as physicians," he said, "must deal with the practical relationship of disability to economic, social and environmental factors. We must realize that the treatment of disease or disability is only a segment of our problem; our primary mission is the treatment of the patient."

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New York Resolution Against Color Bar In Affiliates Defeated

By NNPA News Service

CHICAGO, Ill.—The American Medical Association, holding its ninety-seventh annual convention in this city, turned down on Wednesday of last week a proposal which would have prohibited county medical societies from rejecting any applicant because of race, creed or color.

The proposal, offered by the New York State delegation, was designed to make mandatory the admission of colored doctors, since membership in the association is automatic with membership in county societies.

County medical societies in the southern states and the District of Columbia, by denying colored doctors membership in such groups, bar them also from membership in the national organization.

Dr. Roscoe L. Sensenich of Bend, Ind., the new president of the AMA, explained after the rejection of the proposed amendment to the Constitution that the national organization has no right to "tell our county societies who to take into membership and who not to take."

EXPLAINS ACTION

Such an attempt, he added, "would not be in keeping with a really effective organization." He also declared that there was no provision in the rules of any constituent association that "specifically prohibits admitting certain groups."

Dr. Sensenich expressed opposition to any change in the constitution that would restrict local societies in the absolute control of their membership on the ground that segregation of racial groups would result and the national organization could not "police" all local affiliates.

Dr. George F. Hull, of Chicago, secretary and general manager of the association, took a similar position. He said the AMA was a "confederation of local societies" and that each group was autonomous.

He also argued that there were no county society rules that "specifically prohibit admitting cer-

Jim Crow Plan

By LOUISE STEPHENS

Liberal forces within the American Medical Association, led by the New York State society and supported by individuals in several states, notably New Jersey, were defeated last week in their attempt to halt discrimination against Negro physicians.

At the AMA national convention at the Palmer House, a resolution and recommendation presented by the New York delegates

said, "the exclusion of physicians on the basis of race constitutes an affront to our colleagues, a degradation of the honored traditions of our profession and a violation of our American democratic ideal."

Although many outstanding Negro physicians were present and read papers on their specialties, the convention adopted a resolution presented by the Georgia delegation instead of that of the progressive eastern group.

Counties Rule Supreme

This resolution states that "the county medical society is the sole judge of whom it shall elect to membership provided that the applicant meets the medical requirements for membership and is so recommended."

Although this does not specifically bar Negro physicians, in actual practice most southern counties do not admit them to membership and thus effectively also bars them from membership in the national organization. New York had proposed that southern Negro physicians, who met medical standards of eligibility be permitted into the national organization without having attained membership in the Jim Crow county societies.

President Supports Georgia

Dr. Roscoe L. Sensenich, of South Bend (Ind.), new AMA president, explained that the national organization had no right to "tell . . . county societies who to take . . . and who not to take".

He also argued that there were no county society rules that "specifically prohibit admitting cer-

tain groups." 5-10-48
Negroes Present Paper

Sharply pointing up the snub to Negro physicians was the excellence of the paper read to a co-ordinating body of AMA by Dr. Frank Jones, professor of urology at Howard University and chief of urology service, Friedman hospital, Washington. Dr. Claudius Forney, a member of the Provident hospital staff, headed a group which arranged for the Palmer House luncheon for ALUMNI of Ohio State college. Dr. Henry C. Bryant, former Provident Intern, was junior author of a study prepared on "Study of Diagnosis of Cancer of the Stomach Cells in Stomach Washings", prepared at the University of Michigan.

On the social side Dr. E. Milton Johnson, president of the Cook county physicians, arranged that organization's outing for visitors at Wayside Country Club.

AMA turns down anti-jim crow idea.

CHICAGO—A proposal to bar county medical societies from rejecting any applicant because of race, creed, or color, was turned down by the American Medical ass'n at its 97th annual convention here.

Offered by the New York state delegation, the proposal would have made admission of Negro doctors compulsory, because membership is automatic with membership in county societies.

Dr. Roscoe L. Sensenich, of South Bend (Ind.), new AMA president, explained that the national organization had no right to "tell . . . county societies who to take . . . and who not to take".

Doctors Back Down On Issue

Medics Retain

AMA Won't Lift Its Ban on Race Doctors

Pittsburgh PA

By Staff Correspondent

CHICAGO—The American Medical Association, long a festering sore of American prejudice based on skin color, last week refused to change its constitutional regulations by which county medical associations throughout the country exclude Negro physicians from membership.

Ignoring a resolution offered by the New York State delegation, which sought to eliminate the barriers against Negro physicians that exist in seventeen States and the District of Columbia, the House of Delegates of the AMA accepted unanimously a counter-resolution proposed by the Georgia delegation designed to strengthen the right of the county associations to limit membership.

RESOLUTION KILLED

The New York resolution said that "no component society of the American Medical Association shall exclude any qualified physician of the State of New York in from membership by reason of race, color or creed." But this resolution never reached the floor for a vote.

Four years ago when a similar effort was made, the House of the state medical group, meeting in its 142nd annual session, delegates ruled it did not have the authority to order county associations to change their rules and regulations regarding membership.

As recommended by the Georgia delegation, membership in the AMA would be open only to those

TEXT OF PROPOSAL

"No competent society of the American Medical Association shall exclude any qualified physician from its membership by reason of race, creed or color."

A similar resolution with different wording proposed that "no constituent association shall exclude from membership any physician for other than professional or ethical reasons."

The resolution is the first to be adopted by any state society, and is seen as a significant step toward removing the present barrier against Negro physicians in many states. The resolution had previously been adopted by the New York and Bronx County Medical Societies.

The resolution as introduced

by Dr. J. Lewis Amster on behalf of the Bronx Medical Society earlier in the meeting said in part:

IS "DEGRADING"

"The exclusion of physicians from membership on the

basis of race constitutes an affront to our colleagues, a degradation of the honored tradition of our profession and a violation of our American democratic ideas."

The resolution pointed out the past that, to be a member of the American Medical Association and of the other national medical association, as well as a state society, it is necessary to first become a member of the local county society.

The denial of membership by county societies to Negro physicians has automatically barred them from national affiliation, it was noted.

The New York Medical Society, with a membership of 22,000 physicians and surgeons is second only to the national association in membership.

Sept. 23-48
Resolution Hits Race Barrier To Physicians Of 17 States And D. C.

by the house of delegates through a unanimous vote asks that the AMA constitution be changed to include an amendment which states in part:

"No component society of the American Medical Association shall exclude any qualified physician from its membership by reason of race, creed or color."

Previously, the resolution was adopted by the New York and Bronx County societies. As the first of its kind to be adopted by any state society it is regarded as a step

toward tearing down barriers against Negro physicians in 17 states and the District of Columbia.

organization in which the Southern Constituent societies admit openly to discrimination; but he charged that "by the very words 'special membership' it is evident that segregation of Negro physicians will still be practiced; in fact this practice will be made easier than ever before." Under this proposal, Negro physician would still be permitted to attend County Medical Society meetings, to be appointed to local hospital staffs requiring membership in the County Society, and to attain his rightful place in medicine."

Sept. 23-48
Move To Bar Bias From Medical Ranks

Foundation and Dr. Montague of Anatomy at Hospital the Negro physician in American pointed to recent resolution came place in medicine.

Dr. Flory's announcement came as criticism of the recent resolution approved by the County Medical Societies of both New York and Baltimore to permit Negroes 'special membership' in the American Medical Association. This resolution

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Exclusion Policy To Be Ended

ALBERT DEUTSCH

AMA Veto of New York Plan An Admission of Racial Bias

JUN. 24-48

CHICAGO

With protestations of mingled innocence and impotence, the American Medical Association yesterday turned down a resolution introduced by the New York State delegation that would put an end to the shameful practice of preventing qualified Negro doctors in the South from joining the AMA. The New York delegation—largest in the policy-making AMA house of delegates—had been instructed by their State Medical Society to propose an amendment to the AMA constitution making it unconstitutional for county medical societies to refuse admission to qualified physicians on the basis of race, color or creed. *Star, N.Y.*

Deutsch



Star, N.Y.
Back Where They Began

Dr. R. L. Senenich, newly-inaugurated president of the AMA, yesterday explained the thumbs-down action on the ground that the AMA was a confederation of medical groups and could not "dictate" to any local society on matters of admission practices. *6-24-48*

The present color bar in medicine is not only undemocratic and humiliating, but it imposes serious financial and professional hardships on the Negro doctor in areas of medical discrimination. No doctor can join the AMA directly. He must be admitted to his county medical society, which automatically gives him AMA membership. In most communities, doctors can't get hospital staff appointments or courtesy privileges unless they are members of the local medical society. They can't enter most medical specialties without such membership. They can't get malpractice insurance—a very important financial protection to the average doctor—unless they belong to their medical society.

Barred in Nation's Capital

Yet, throughout the South and in the Nation's capital, Negro doctors are barred from the county medical societies, and hence from the AMA. In most places, they aren't even allowed to attend medical meetings, further handicapping them from advancement in their craft. The sum effect is to hold down the professional skills and knowledge of thousands of doctors.

who must minister to millions of darkskinned Americans south of the Mason-Dixon line.

This inequity has been called to the attention of the AMA time and again. Last fall the New York County Medical Society—largest local affiliate of organized medicine—voted by an overwhelming majority to recommend to the state body that it instruct its delegates to introduce the anti-discrimination amendment at the AMA annual meeting now in progress. The state society, in turn, voted favorably on the amendment. The New York delegates dutifully introduced the resolution, but it must be said, in truth, that they did not put in an impassioned struggle for its adoption. Indeed, they seemed lukewarm to it themselves. *Star, N.Y.*

The AMA is powerful enough to hold its constituent societies strictly and sternly to the party line on the issue of National Health Insurance. But when it is asked to eliminate the disgraceful practice that bars qualified physicians from its ranks and hinders their professional advancement, its leaders profess ignorance and its policy-making body throws up its hands and professes impotence.

The AMA, in short, is doing business at the same old stand in the same old way.

AMA Upholds Bias Clauses

Star, N.Y.
CHICAGO, June 23 (AP)—The American Medical Association rejected today a move to make admission of Negro doctors to the Association mandatory throughout the United States. *Star, N.Y.*

The rejection by the AMA house of delegates was made on the principle that county medical societies are autonomous and the AMA constitution does not empower the parent body to dictate to its member locals. *6-24-48*

Membership in the AMA is automatic for any doctor who belongs to his county medical society.

N. Y. Made Proposal

The New York State delegation presented a resolution proposing that it be made mandatory that no county society reject anyone for membership because of race, creed or color. The resolution was transferred to the reference committee, which reported it was constitutionally impossible of adoption. The House of Delegates agreed with the

committee. *6-24-48*

Chicago Medic Speaks Against AMA Intolerance

Star, N.Y.
CHICAGO (AP)—A local Chicago Negro member of the American Medical association came out this week with a starting indictment of the AMA for its recent refusal to remove racial bars from various member organizations excluding Negro physicians. *Star, N.Y.*

Dr. Carl Glennis Roberts, considered to be one of the "fair-hired" Negro members of the association, said:

"The rejection of the proposed amendment submitted by the New York society of the AMA house of delegates in the recent Chicago meeting represents a temporary triumph of the forces of bigotry and reaction." *Star, N.Y.*

RESOLUTION SCORED

In scoring the AMA for its passing of the racist resolution, he said:

"It presents the AMA before a world struggling to preserve democracy as a reactionary organization which places so-called states' rights above human rights."

"Shall organized medicine anywhere in this country use the color of skin to exclude any doctor otherwise perfectly qualified to join its ranks and be entitled to its protection and privileges? This is the one issue at stake." *Star, N.Y.*

"The AMA sits as judge and jury in determining admissibility to hospital staffs and qualifications for membership in the special societies. All doctors must depend upon use of hospital facilities and membership in specialty boards to practice their profession." *Star, N.Y.*

"Primary membership in the AMA is essential as a preliminary to the other privileges. How can it permanently exclude us from membership and then penalize us because we are not members?" *Star, N.Y.*

"Continued refusal of equity and justice will drive us to support a government control that will provide a remedy. Through its recent action the AMA has done much to hasten this day. Our efforts will be unabated until justice is done." *Star, N.Y.*

Doxey Wilkerson And 2 Others In Yergan Complaint Are Freed

Ruling in Lower Manhattan

Court that a "prima facie case had not been made out," Magistrate

John E. Prendergast on Monday freed three men accused of simple assault by Dr. Max Yergan, executive director of the Council on African Affairs.

The trio, whose arrests took place on June 19th in the Council's offices at 23 West 26th street are Dr. Doxey Wilkerson, 43, former editor of Yergan's newspaper The People's Voice, and now on the Jefferson School of Social Science; Harold Cammer, 39, attorney for the group opposing Dr. Yergan in the Council, and Thomas Lloyd, 59, who said he had been hired as a guard. *Star, N.Y.*

In dismissing the case, Magistrate Prendergast commended both sides for their straightforward testimony and observed that "both sides appear to be men of some station in life and in the community." The defendants indicated that they would not file counter-charges of assault against Dr. Yergan. *Star, N.Y.*

The trouble arose when right-wing and left-wing factions of the Council differed on matters of policy.

State Medical Society Will Vote On Color Bar in AMA Membership

The New York State Medical Society will have a chance to strike a vigorous blow for medical democracy when it holds its annual meeting here starting May 17. Its House of Delegates will consider a resolution presented by its members from New York County, calling for an end to the color bar that prevents many qualified Negro doctors from joining the American Medical Assn.

Negro doctors in 17 states and the District of Columbia are now barred from AMA membership because they are excluded from their county medical societies because of their race, and because a doctor can't be an AMA member until he is admitted to his local society. It is a vicious cycle of discrimination, which strikes not only at the Negro doctor's personal pride, but at his purse and at his professional advancement.

Taking cognizance of this injustice to dark-skinned doctors, the New York County Medical Society—largest component of the AMA—last month adopted a resolution recommending that the AMA constitution be altered to include this sentence:

"No component Society of the American Medical Assn. shall exclude any qualified physician from its membership by reason of race, creed or color."

Color Bar Degrades Medical Traditions

The New York County Medical Society resolution noted that physicians excluded from AMA membership because of the color bar set up at the local level are likewise denied the right to apply for membership in other national professional societies where membership in the AMA is a prerequisite. These physicians, as a result, are "restrained in the legitimate pursuit and furtherance of their professional activities," the resolution stated. It went on:

"This exclusion of physicians on the basis of race constitutes an affront to our colleagues, a degradation of the honored traditions of our profession, and a violation of our American democratic ideal."

The resolution now goes to the State body's House of Delegates for action. If the State society approves, it will then be brought before the AMA House of Delegates at the annual meeting to be held in June.

The AMA ruling clique thus far has buck-passed responsibility for racial discrimination with the claim that they cannot tell their local components who to take in or to exclude. This is a strange excuse for a professional organization of great prestige which requires its own members to be members of the local societies. It is certainly an untenable excuse for an organization claiming in its constitution that its main objects are "to promote the science and art of medicine and the betterment



Deutsch

of public health." Neither medicine nor the public health is served by racial discrimination which hampers practitioners from advancement in their art and science solely because of their color.

AMA Can Act When

It Wants to Act

Thurs. 4-29-48

The American Medical Assn., when faced with a strikingly similar problem in another field, acted vigorously to erase an injustice. Medical officers of the U. S. Army, Navy, Public Health Service and Veterans Administration often found themselves barred from local medical societies because they were not in actual practice in a civilian community and hence were not eligible. They were thus barred from AMA membership, too. The American Medical Assn. has changed its bylaws to permit physicians in these Federal civilian and military agencies to apply for direct AMA fellowship.

It has been proposed that the AMA now do the same for Negro doctors barred from local societies because of their race. The New York County Medical Society actually recommended direct fellowships for these doctors, at its meeting last October. Reasonable objection has been raised against this device, however, mainly on the ground that it puts Negroes, in the discriminatory areas, into a Jim-Crow category, still disadvantaged by non-membership in their local medical societies.

By far the best solution is for the AMA to take a forthright and firm stand on the whole matter, basing itself on medical democracy, and to bar its local components from barring qualified doctors on grounds that have nothing to do with medical ability or ethics. It is to be hoped, then, that the New York State Medical Society upholds the principles inherent in our State anti-discrimination laws, by adopting the resolution offered by the New York County delegates and sending it on to the parent body—the AMA—for final decision.

ERASE COLOR LINE, PHYSICIANS URGED

Move Before State Society Would End Exclusion From

National Medical Group

New York, N.Y.

COUNTIES HOLD VETO NOW

Thurs. 5-18-48

Amendment Would Open Way to Coveted Membership for All but Ethico-Offenders

their state societies.

"Physicians excluded from membership in the American Medical Association," the resolution says, "are for that reason denied the right to apply for membership in other national professional societies where membership in the

the one issue at stake.

Continuing, Dr. Roberts said: "Continued refusal of equity and justice will drive us to support a government control that will provide a remedy. Through its recent action the AMA has done much to hasten this day. Our efforts will be unabated until justice is done."

AMA is a prerequisite. These physicians are thereby restrained in the legitimate pursuit and furtherance of their professional activities.

"The exclusion of physicians on the basis of race constitutes an affront to our colleagues, a degradation of the honored traditions of our profession, and a violation of our American democratic ideal."

Initiated in Bronx

The resolution, introduced on behalf of the Bronx County Medical Society by Dr. J. Lewis Amster, urges that the constitution of the AMA be amended to include the following: "No constituent association shall exclude from membership any physician for other than professional or ethical reasons."

A similar resolution was adopted recently by the Medical Society of the County of New York and also was introduced yesterday on behalf of that society. Action on these resolutions will be taken at the meeting today or tomorrow.

Chicago Doctor Blasts AMA For Stand On Race

Sat. 5-24-48

CHICAGO, Ill.—(AP)—A local Chicago Negro member of the American Medical Association came out last week with a startling indictment of the AMA for its recent refusal to remove racial bars from various member organizations excluding Negro physicians.

Dr. Carl Glennis Roberts, considered to be one of the "fair haired" Negro members of the association, said:

"The rejection of the proposed amendment submitted by the New York Society to the AMA house of delegates in the recent Chicago meeting represents a temporary triumph of the forces of bigotry and reaction."

In scoring the AMA for its passage of the racist Georgia resolution, he said:

REACTIONARY GROUP

"It presents the AMA before a world struggling to preserve democracy as a reactionary organization which places so-called states' rights above human rights. Shall organized medicine anywhere in this country use the color of skin to exclude any doctor otherwise perfectly qualified to join its ranks and be entitled to its protection and privileges? This is

Negro Doctor Members

AP—The that it be made mandatory that no re-pouinty society reject anyone for membership because of race, creed or color. The association's new president Dr. Roscoe L. Sennich of South New York, Chicago and other cities in which Negro physicians are admitted to membership.

AP—The rejection by the AMA House of Delegates was made on the principle that county medical societies are autonomous and the AMA does not empower the parent body to dictate to its member locals.

Membership in the American Medical Association is automatic for any doctor who belongs to his county medical society.

The New York State delegation presented the resolution proposing

A. M. A. BACKS UNITS BARRING NEGROES

(AC)
Kills New York Move to Halt
Exclusion in Some States

of Colored Members

New York, N. Y.

LOCAL AUTONOMY UPHELD

Thurs. 6-24-48

Chicago Meeting Says the Red
Cross Should Not Use the
Term 'Free Blood'

By ROBERT PLUMB

Special to THE NEW YORK TIMES

CHICAGO, June 23—An attempt to amend the constitution of the American Medical Association so that constituent associations could not exclude applicants from their membership except for "professional or ethical reasons" was rejected by the A.M.A. House of Delegates at its meeting here today.

The action came about as the result of a resolution submitted to the governing body of the association by the Medical Society of the State of New York. The resolution was designed primarily to halt the unofficial practice of keeping Negroes out of medical societies in Southern states.

Dr. Roscoe L. Sensenich of South Bend, Ind., the new president of the American Medical Association, declared after the rejection of the proposed amendment that the national organization could not "tell our county societies who to take into membership and who not to take."

He added that such an attempt "would not be in keeping with a really effective organization" and that there was no provision in any county society rules that "specifically prohibits admitting certain groups."

Any other arrangement than leaving membership up to the local county societies would amount to segregation of racial groups and the national organization could not "police" all local affiliates, he declared.

Lull Backs Local Autonomy

This was reiterated by Dr. George F. Lull of Chicago, secretary and general manager of the association, who added that the A.M.A. was a "confederation of constituent societies" and that each group was autonomous.

The report of the reference committee was accepted by the House of Delegates this morning after the

resolution was read by title only. The report was:

"It is the recommendation of your reference committee that the county medical society is the sole judge of whom it shall elect to membership provided that the applicant meets the medical requirements for membership and is so recommended."

In effect, the group thus upheld a resolution submitted by the Medical Association of the State of Georgia which was offered in opposition to the New York State proposal. The Georgia resolution urged that the present rules for membership in the American Medical Association be retained.

These rules require that a doctor belong to a "constituent association," which is a state association, before he is an A.M.A. member. In turn, the state societies require a membership in a "component society" or county society.

Exclusion a "Degradation"

The resolution by the New York State society read in part:

"The exclusion of physicians on the basis of race constitutes an affront to our colleagues, a degradation of the honored traditions of our profession and a violation of our American democratic ideal."

It was drawn up at the meeting of the society in New York City in May and presented here by state delegates. The resolutions urged that the constitution of the American Medical Association be amended to include the following sentence:

"No constituent association shall exclude from membership any physician for other than professional or ethical reasons."

The House of Delegates also adopted a report urging that no change should be made at this time in the "approval in principle" which was given for operation of the American Red Cross blood program during the A.M.A. meeting last January.

It was the opinion of the group, however, that "approval in principle" be construed as follows:

"First, local control must be by the county medical society.

"Second, the local medical society should be the contact in the initial contemplation of inauguration of a new blood bank."

"Third, no publicity nor news releases shall be released except by mutual consent of the local county medical society and the local chapter of the American Red Cross."

"Fourth, difference of opinion in establishment or operation of a blood bank in either administrative or technical detail shall be arbitrated at state levels by joint committees from the state medical society and the American Red Cross."

To this the group added that it "deplores the use of the term 'free blood' in the publicity of the American Red Cross" because

"provision of free medical service or supply to everyone without regard to ability to pay is in opposition to the principle that it is the responsibility of an individual to assume the obligations of medical expense just as he does for other living expense."

NEW YORK AMA Upholds Bias Clauses

CHICAGO, June 23 (AP)—The American Medical Association rejected today a move to make admission of Negro doctors to the Association mandatory throughout the United States.

The rejection by the AMA house of delegates was made on the principle that county medical societies are autonomous and the AMA constitution does not empower the parent body to dictate to its member locals.

Membership in the AMA is automatic for any doctor who belongs to his county medical society.

N. Y. State Proposal

The New York State delegation presented a resolution proposing that it be made mandatory that no county society reject anyone for membership because of race, creed or color. The resolution was transferred to the reference committee, which reported it was constitutionally impossible of adoption. The House of Delegates agreed with the committee.

Mandatory Move to Admit Negroes Is Rejected By Medical Association

Group Says It Can't Dictate

Thurs. 6-24-48

Chicago, June 23 (AP)—The American Medical Association rejected today a move to make admission of Negro doctors to the Association mandatory throughout the United States.

The rejection by the A.M.A. house of delegates was made on the principle that county medical societies are autonomous and the A.M.A. constitution does not empower the parent body to dictate to its member locals.

Membership in the American Medical Association is automatic for any doctor who belongs to his county medical society.

New Allergy Reported.

The New York state delegation

had presented a resolution proposing that it be made mandatory that no county society reject anyone for membership because of race, creed, or color.

A new kind of allergy, a fingernail disease of women due to a new type of nail polish, was reported to the A.M.A. today.

This trouble was reported by Doctors Douglas A. MacFayden and Bernard Yaffe, of Presbyterian Hospital, Chicago, and the University of Illinois School of Medicine.

Makes Polish Last.

They said the nail trouble has been found among a few of the women using "base" polish, which is something new, serving as a foundation for the usual colored polish. It makes the polish last longer.

The nails, said the doctors, became discolored, got hard, brittle.

a bit thin, dead white in color and finally buckled into a cylindrical shape. The nails got well, they said, about four months after the women discontinued the use of the "base."

Their tests show this is an allergy, that is some women get it, but most do not. The allergy is unusual because it affects nothing except nails and the skin directly under them.

6-24-48

19c 1948

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Vote Admission Of
Medics To A.M.A.

NEW YORK (SNS) — A vote was made Monday night (March 22) by the American Medical Association to admit Negro physicians to the AMA membership. Previously some Negro physicians have been barred from membership because they were not members of county's medical society. In many states Negro physicians have been denied memberships in the County Medical Society, and county society membership is required to receive AMA membership. *Thurs. 3-25-48*

bership. Thurs. 3-25-48

Race Barriers In A. M. A. *Daily World* (From The New York Herald Tribune)

(From The New York Herald Tribune)

Many medical men are deeply disturbed by the fact that the all-pervasive influence of a segregation pattern prevailing in a part of the United States extends to the American Medical Association. The A.M.A. seeks such ends as the advancement of medical education the disclosure of quackery and the preservation of high standards of medical practice. To bar any qualified physician from participation in efforts toward these ends goes contrary to every professional and scientific concept. Dr. Morris Fishbein has pointed out that the exacting principles of ethics which have guided the A.M.A. for a hundred years "preach always individual responsibility and the rights of the individual man . . . recognize that medicine is both an art and science." The exclusion of qualified Negroes limits both individual rights and the advancement of medical art and science.

An ironical twist is that the exclusion is almost inadvertent; the A.M.A. itself raises no discriminatory barriers. The association is, however, a federation of local medical societies. And the color line, drawn locally in seventeen states and the District of Columbia, automatically bars Negro doctors in those areas from A.M.A. membership. Because A.M.A. membership is generally required for certification as a specialist and for hospital staff appointments, the Negroes concerned are barred from professional advancement. *Atlanta, Ga. Tues.*

To remove barriers which the A.M.A. itself does not raise requires a change in its constitution. On Tuesday the Medical Society of the State of New York, at the behest of the New York and Bronx County societies, urged an amendment providing that no component society of the American Medical Association shall exclude any qualified physician from its membership by reason of race, creed or color." The state society's House of Delegates adopted the requisite resolution without a dissenting vote. 5-25-48

It would be to their everlasting credit if doctors would thus eliminate an invidious discrimination from their pursuit of scientific and humanitarian goals.

FOR MEDICAL DEMOCRACY

Strong language was used by the authors of ~~the~~ Resolution which was adopted without dissent by the House of Delegates of the Medical Society of the State of New York and which

would end the discrimination that had prevented qualified Negro physician from joining county and state medical societies and hence the American Medical Association. "The exclusion of physicians from membership on the basis of race constitutes an affront to

American Medical Association

our colleagues, a degradation of the honored traditions of our profession and a violation of our American democratic ideal," are the words used in this resolution. *New York, N.Y.*

Before any citizen can enter a medical school he must have met the necessary academic qualifications. Next he must submit himself to a scholastic discipline which is merciless and which breaks many an aspirant to a medical career, then pass a rigid state examination after graduation and finally serve a prescribed period as an interne. The survivor who wishes to practice medicine does not have to join a county medical society and so become a member of the American Medical Association, but unless he does his standing in his chosen profession is so low that the privileges of hospitals are likely to be denied him and that he will find it difficult both to qualify as a specialist and to be accepted as one. There is no excuse for discrimination of this kind in any scientific profession, and least of all in medicine, which from the days of Hippocrates has made no distinction in caring for the sick and injured on the basis of race, religion, nationality or social standing.

Jim Crow, M. D. / 900
Physician, Jr.

Of the 200,000 white physicians in the United States, 133,000 are members of the American Medical Association. Of the 5,000 Negro physicians, only 250 are members of the AMA. *New York 291 U.*

One reason that few Negro doctors belong is that in seventeen Southern and border states and the District of Columbia Negro physicians are barred by county medical societies. To join the AMA one must be accepted by a county society. Negro doctors are handicapped professionally! For example, AMA membership is a requisite for practice in many hospitals and is required for certification to specialist standing by some national professional bodies. *John.*

A strong move against this discrimination was launched last week by the New York State Medical Society, whose 22,000 members make it the second largest medical group in the country. At the society's convention in New York City the bars to Negro membership in the AMA were denounced as a "degradation of the honored traditions of our profession." Unanimously the delegates adopted a resolution urging that the AMA constitution be amended to provide: "No component society * * * shall exclude any qualified physician from membership by reason of race, creed or color." *5-23-48*

The proposal will be put before the AMA House of Delegates in Chicago.

A Step to End Jimcrow Among Doctors

ASC

DOCTORS have begun to play more prominent roles in the fields of public health. Dr. P. P. Barker, listed in American Men of Science, is a leading neurologist for the Veterans Administration; Dr. Paul Cornely is a staff-member of the Chicago Municipal Tuberculosis Sanatorium. *New York, N.Y.*
Dr. George Cannon is well known to progressive New Yorkers as a fighter for liberal causes. He is one of our leading authorities in the field of preventive tuberculosis. *New York, N.Y.*
The resolution adopted by the New York State Medical Society just become national throughout the AMA.

The southernbourbons shout about providing equal opportunities for Negro students. Alabama has about 20,000 "grannies" or unlicensed midwives that deliver children without benefit of sanitary facilities or training. The southern states provide one hospital bed for every 1,300 Negroes, as compared to an average bed for every 110 white persons.

aplicable in the field of health. Yet despite the obvious dangers from the spread of epidemics and sickness, many hospitals will not admit Negro patients or Negro doctors. *New York, N.Y.*



Ten-Year National Health Plan Sketched by Assembly of Experts

WASHINGTON

The National Health Assembly, which started here four days ago in an atmosphere of mutual suspicion and distrust among the 800 representatives of organized medicine, public health, labor and consumer groups, wound up its conference yesterday with a series of proposals for a health plan for the nation that reflected a gratifying degree of basic principles. The Assembly was convened by Federal Security Administrator Oscar R. Ewing to help him formulate a 10-year health program which he expects to present to President Truman in June.

The most pleasantly surprising element at the Assembly, perhaps, was the ideological new look adopted by the numerous representatives of the American Medical Assn. who served on the 14 sections of the Assembly. On the most controversial issue before the Assembly—health insurance—a compromise report was signed by AMA officials, liberal doctors and labor and consumer-group leaders. It indorsed seven of the eight essential points made in the state drawn up Monday by 15 advocates of national health insurance.

The final report of the Assembly's medical care section, where the health insurance issue was debated, declared:

"Adequate medical service for the prevention of illness, the care and relief of sickness and the promotion of a high level of physical, mental and social health should be available to all without regard to race, color, creed or economic status."

The principle of contributory health insurance should be the basic method of financing medical care of the large majority of the American people, in order to remove the burden of unpredictable sickness costs, abolish the economic barrier to adequate medical services and avoid the indignities of a 'means test'....

Right to Establish Voluntary Insurance Plans

The people have the right to establish voluntary insurance plans on a co-operative basis. Legal restrictions upon such right (other than those necessary to assure proper standards and qualifications) now existing in a number of states, should be removed....

"A medical care program by itself will not solve the health problems of the nation. It must be co-ordinated with all efforts directed toward providing the people with adequate housing, a living wage, continuous productive and creative employment under safe working conditions, satisfying recreation and such other measures as will correct conditions that adversely affect the physical, mental and social health of the people."

While there was general agreement that health insurance must form a cornerstone of medical economics, the delegates resolved their differences



Deutsch

by noting in the report "that a national health insurance plan is necessary."

It is significant that the report, presented to the windup session of the Assembly by Dr. Hugh Leavell of Harvard University, was signed by Dr. Ernst Boas, chairman of the Liberal Physicians Forum, and Drs. Thomas A. McGoldrick and James R. McVay, representing the American Medical Assn.

AMA Delegates Oppose 'Pauper' Medicine

If the signing of this report by top-ranking AMA representatives truly reflects the official view of organized medicine—and there is reason to believe they do—the incident marks several important advances in AMA philosophy. It means that:

"The AMA, which 15 years ago was denouncing all forms of health insurance as "Communistic," now accepts that "contributory health insurance" (which may be either voluntary and private or compulsory and governmental) should be the "basic method of financial medical care" for most people.

"The AMA, which five years ago was found guilty of violation of the Federal Anti-Trust law for trying to break up a co-operative health insurance plan in Washington, D. C., and which has shown hostility to other co-operative projects, now recognizes the right of the people to establish such plans. It further repudiates laws on the statute books of 20 states—mainly inspired by state medical societies—that restrict the people's rights to set up health insurance plans of their own.

"By opposing the "means test" in the dispensation of medical care, the AMA inferentially opposes a cardinal point in Senator Taft's national health bill, which calls for an annual Federal expenditure of \$200,000,000 to help states provide medical care on a charity basis. The "means test," whereby people have to prove they are indigent in order to receive help, is a fundamental part of the Taft bill, introduced in opposition to the Wagner-Murray-Dingell bill and widely known as the "pauper medicine bill."

AMA representatives on other Assembly panels signed reports decrying racial discrimination in the training and practice of medical personnel.

As I noted yesterday, the AMA seems to have come a long way on issues of national health, although it is as inflexible as ever on the question of a Federal health insurance program.

The single major note of discord that developed at the Assembly was evoked by a speech delivered by Dr. Morris Fishbein, editor of the *AMA Journal*, Monday night, which was bitterly denounced at the closing session yesterday by Nelson Cruikshank, AFL representative, as a flagrant violation of an agreement concerning discussion of controversial issues. I'll take this incident up in a later column. All told, the results achieved by the National Health Assembly, first such gathering in 10 years, have exceeded my expectations.

A. M. A. UPHOLDS BIAS

THE American Medical Association, meeting in Chicago last week, refused to change its constitutional regulations by which county medical associations throughout the country exclude Negro physicians from membership.

Sat. 7-3-48

Ignoring a resolution offered by the New York State delegation, which sought to eliminate the barriers against Negro physicians that exist in 17 states and the District of Columbia, the House of Delegates of the A. M. A. accepted unanimously a counter-resolution proposed by the Georgia delegation designed to strengthen the right of the county association to limit membership.

The New York resolution, which says that "no component society of the American Medical Association shall exclude any qualified physician from its membership by reason of race, color or creed," was introduced and referred to a special committee of action. In view of the unanimous approval given the Georgia resolution, however, the New York proposal was immediately doomed. As recommended by the Georgia delegation, membership in the A. M. A. would be open only to those qualified physicians who are active members in their constituent association "as determined by their constituent association." Prior to adopting this change in the constitution of the A. M. A., no mention was made of the rights to be enjoyed in the selection of members by the associations that make up the national body.

So instead of the A. M. A., as was hoped, becoming more liberal and an organization more useful to Negro physicians, it has

become a more restrictive organization and one designed to hamper even more than it has in the past Negro physicians. Exclusion from membership in the A. M. A. automatically bars a physician from being certified as a specialist by the various national certifying boards.

It is this exclusion from membership which has really held back our Negro physicians from certification as specialists and deprives many hospitals, badly in need of specialists, of their services.

The A. M. A. should change its name, for its recent action makes it anything but American.

Stand against the segregation of Negro doctors and medical students

WHITE MEDICINE A rule of the American Medical Association gives county medical societies the right to pass on membership applications for the national body. A month ago the New York State Medical Society urged the A. M. A. to drop this regulation, which it argued had allowed many local units to exclude qualified Negro doctors from the association. Last Wednesday delegates at the A. M. A.'s national convention voted to keep the local option clause unchanged. They rejected a New York-sponsored amendment which would have prevented a county society from rejecting any applicant except for ethnic reasons.

"I deny that Dr. Fishbein is the spokesman for American workers," Cruikshank said. "Many groups of labor, consumers and in the assembly—Negro segregation and compulsory health insurance. (See Albert medical needs of the people.)

Fishbein was reported enroute to Chicago to speak at the time Cruikshank spoke. Other representatives of the American Medical Association said they planned no immediate reply.

Dr. W. J. Lear of New York, representing the Association of Internes and Medical Students, said the assembly section on per-

sonnel should have taken a more definite

Nelson Cruikshank, American Federation of Labor representative on the assembly's executive committee, took the floor to criticize Dr. Morris Fishbein of the American Medical Association.

He quoted the AMA spokesman as saying, "Students do not want a 'peasant' sonnel should have

Segregation in Med Schools Hit at Health Assembly

By Associated Press

Labor and student delegates to the National Health Assembly fired bursts of criticism today at the handling of two subjects to achieve a national health insurance program. (See Albert compulsory health insurance on opposite page.)

Nelson Cruikshank, American Federation of Labor representative on the assembly's executive committee, took the floor to criticize Dr. Morris Fishbein of the American Medical Association.

He quoted the AMA spokesman as saying, "Students do not want a 'peasant' sonnel should have

Hospitals

Hospitals For Negroes

To the Editor of The News:

It's hard to understand the reason why there are no hospital facilities for Negro doctors in our large city.

I am a firm believer in segregation, but our laws on segregation are very confusing. If Negro patients are admitted to our hospitals then why aren't the Negro physician allowed to attend them? *Birmingham, Ala.*

Some provisions should be made where a Negro doctor can attend his patients in an accredited hospital here. If we are unable at this time to support an all-Negro hospital, then, it seems to me, the Negro physician should be permitted to serve his people in our tax supported hospital here.

8708 3rd Ave., N. MRS. A. A. WOMACK.

Jim Crow Condoned

The 1948 News
—(G) The City of Los Angeles have not only condoned the Jim Crow Hospital policy by refraining from taking effective steps to provide medical care for Negroes, but have been apathetic in attacking the causes of illness in the Negro sections. Segregation of Negroes into crowded unsanitary slum areas has built up reservoirs of diseases which spill over into the rest of the city.

James Hamilton, former president of the American Hospital Association, says that the city must have 10,000 beds to relieve the desperate situation. And even then, these beds will be of no use to the immediate problem, unless the city of Los Angeles cures itself of the Jim Crow complex. *June 4-8-48*

Negro Doctors Given Limited Hospital Privileges

8-21-48 Sat. LYNCHBURG, Va. — (ANP) — Limited hospital facilities for the use of Negro doctors were given at the local hospital here, it was announced last week.

Practice of colored medics will be limited to colored patients, Robert S. Hudgins, administrator, said. These privileges have been awarded on a trial basis until Dec. 31.

Jim Crow Hospitals**Hit By Walter White**

Atlanta, Ga. WASHINGTON — (SNS) — Appearing before a Senate hearing Tuesday, Walter White told the assembly that Negroes were opposed to separate hospitals, schools and

other institutions. *Jun. 26-48*

The NAACP head testified before a Senate Labor subcommittee considering a bill to set up a Negro veterans' hospital at the birthplace of Booker T. Washington in Franklin County, Virginia. *Jun. 26-48*

When Chairman Morse, Republican, Oregon, reminded White that Washington had helped found several all-Negro institutions, including Tuskegee Institute in Alabama White replied that his father and Washington were "old friends," adding: "if the Negro scientist were alive today I'm sure he would not favor any segregated institutions."

White also made reference to the recent Supreme court decision favoring the admission of a Negro woman to the University of Oklahoma.

Opposition of the separate hospital also came from Maj. General Paul R. Hawley, a former Chief of the Veterans Administration Medical Services. The House, however, had already passed a bill authorizing the Negro veteran's hospital in Virginia at a cost of \$5,000,000. It was introduced by Sen. Revercomb, Republican, West Virginia, with an amount fixed at \$2,000,000.

Vanderbilt Hosp. Closed to Race

at 6-19-48 NASHVILLE, Tenn. — A thirty-bed curtailment of Negro hospital facilities here was made known this week with the announcement that Vanderbilt Hospital's doors have been closed to Negro patients. The action on the part of the hospital administration, effective June 1, was confirmed early this week by Clarence Connell, hospital superintendent.

The decision will throw largely on General and Hubbard Hospitals the burden of caring for the Negro sick, who have been receiving treatment at Vanderbilt.

Hubbard Hospital for Negroes is also threatened with the prospect of closing July 1 unless sufficient funds are found to insure continued operation during the 1948-49 fiscal year. *at 6-19-48*

"However, we're not going to turn anybody out," Connell said. Negro patients now under treatment will not be transferred, but will continue at Vanderbilt until they are dismissed.

"Jim Crow" Medicine

Los Angeles — (G) — (Special to Global News Syndicate) — The results of Jim Crow medicine in Los Angeles have been disastrous. There are 22

hospitals in the city, but there are no beds for the 160,000 Negroes seeking relief from sickness. He must lie down until he recovers, or until he dies. If he is lucky, he may gain admission to the County General Hospital, expressly reserved for charity patients, but the 21 institutions of mercy are closed to persons of color.

The County General is the only hospital of Los Angeles that has opened the door to race physicians on its staff, and there only two Negro physicians, and it is the only hospital which will admit Negroes. The other hospitals, Jim Crow Negroes form their staffs, and the white doctors, for the most part, refuse to treat Negroes. The result has been that the tubercular rate is 400 per cent higher in slum areas than in comparable white districts.

WAVONNA HOSPITAL
The Brightline Hospital
DISCRIMINATION ACTS

at 6-19-48 ST. LOUIS — (ANP) — "I'll devote the rest of my life to fighting segregation in Veterans' Administration hospitals," said Edgar G. Brown here Sunday.

"My sister, Velma Mae Brown, has just died in a segregated wing of the Jefferson Barracks near here. Although she had served four years in the U. S. Army and retired with the rank of first lieutenant, they would not admit her to the women's ward, but put her in a room in the Negro men's ward where she was lacking any sort of decent facilities," Brown declared. He said that when she first was placed in the room and asked for assistance, a man came bearing a bed pan.

at 6-19-48 Brown had gone to Washington where he appealed to the medical office of VA under Dr. Hawley and to numerous congressmen and senators for relief from the rule of segregation in Jefferson Barracks but unsuccessfully.

Miss Brown, a native of Southern Illinois, graduated as a nurse from the Homer G. Phillips Hospital here, served in the Army for four years, much of the time at Ft. Huachuca. Before entering the hospital she had been employed as a public nurse here in St. Louis.

NO BEDS FOR NEGROES1948
LOS ANGELES (AP correspondent)

Mar. 8-48
Keep out. There are 22 hospitals in Los Angeles, but when one of the city's 160,000 Negroes gets sick, there is usually only one thing he can do: lie down until he recovers or until he dies. If he is lucky, he may gain admission to the County General Hospital, reserved for charity patients. But he can make the rounds of the other 21 institutions of mercy and never get anywhere, because these are Jim Crow hospitals.

New Republic
County General is the only hospital in Los Angeles which allows Negro physicians to serve on its staff—it has two—and it is the only one which will admit Negroes. The other hospitals bar Negroes from their staffs, and the white doctors for the most part refuse to treat Negroes. Since they must consent to do so before a Negro patient is admitted, the effect is to bar the doors against the Negro race.

Mar. 8-48
The results of Jim Crow medicine in Los Angeles have been disastrous. In certain Negro sections, the tubercular rate is 400 percent higher than in comparable white districts. In the main Negro section, deaths per 100,000 hospital population from tuberculosis were 142.8, whereas in a typical white area, the incidence was 36.8.

Mar. 8-48
Twin errors. Los Angeles authorities have not only, by condoning a Jim Crow hospital policy, refrained from taking effective steps to provide medical care for Negroes, but they have also been apathetic in attacking the causes of sickness in the Negro sections. Segregation of Negroes into crowded, unsanitary slum areas has built up reservoirs of disease which spill over into the rest of the city.

The only real step forward has been taken by a non-sectarian, non-profit interracial organization of professional people who are planning construction of West View Hospital, which will contain 50 beds. When this institution begins operation, it will admit

patients without regard to race, creed or color, and its staff will include both white and Negro doctors.

But 50 beds is small potatoes in view of what is needed. James Hamilton, former president of the American Hospital Association, says that the city must have 10,000. And even then, these beds will be no use to Negroes until Los Angeles cures itself of its Jim Crow complex.

21 Refuse Care To 150,000 Citizens

LOS ANGELES—(AP)—

When one of the 160,000 Negro citizens here become ill, he usually finds there is only one thing he can do: lie down until he recovers or until he dies. If he is lucky, he might gain admission to the County General Hospital, an institution reserved for charity patients which is the only one out of 22 hospitals throughout the city admitting Negroes.

As a matter of fact, County General is the only hospital in the city which allows Negro physicians to serve on its staff—it has two. The other hospitals bar Negro medical personnel, and the white doctors, for the most part, refuse to serve Negro patients.

The hospitals themselves use this dodge to keep Negroes out, since a white physician must consent to treat a Negro before the patient can be admitted.

In the face of this Jim Crow medical practice, Negroes have suffered greatly. In certain sections, the tubercular rate is 400 percent higher than in comparable white districts. In the main colored section, deaths per 100,000 population from tuberculosis were 142.8 against the incidence for a typical white area of 36.8.

City authorities have not only refrained from taking steps to provide adequate medical care for Negroes, but they have also been sluggish about attacking causes of sickness in the colored sections.

19c 1948

Hospitals (Kentucky)

~~19c~~
**Baer Backs Bill Easing
Ban On Negroes**

Frankfort, Ky., March 4 (AP)—The governing boards of institutions which train nurses or have postgraduate facilities for doctors could by majority vote permit Negroes to take courses under terms of a bill presented to the Legislature today by Representative Sidney Baer, Louisville.

There are nurse training agencies and postgraduate opportunities in hospitals and schools in Kentucky for members of other races, but none for Negroes, the Baer bill stated.

30 Babies Die as City Pinches Pennies; Majority Are Negroes

New York, N.Y. *June 5-1948*
SAN ANTONIO, Tex.—This city's health board has revealed that 30 babies died of infant diarrhea in the 24 days between April 26 and May 19.

The wording of the statement by the health board indicated the shock which even these cautious and conservative people felt at the situation. A. H. Cadwallader, Jr., Chairman of the board, read a statement into the minutes declaring:

"The cause of a large percentage of these deaths is the lack of treatment and hospital facilities in San Antonio, by reason of the closing of the Robert E. Green Memorial Hospital—the only source of treatment available to almost all of the afflicted infants." *5-30-48*

Why should that hospital be the "only source of treatment?" These infants are practically all Negro children, Jim-crowed out of the other hospitals!

The Worker
MONTHS AGO THE WORKER carried an article denouncing the closing of the Robert E. Green Hospital where Negroes could be treated in San Antonio. That article pointed out that this would cost the lives of the Negro people.

The San Antonio Health Board in view of the emergency, called upon the Board of Managers of the Greene Memorial Hospital to reopen it. The hospital had been closed as an economy measure, with the city and county refusing to appropriate funds for its continuance.

It is well known that the cause of infant diarrhea lies in poor sanitation, bad sewage disposal and impure water supply, impure milk, disease breeding garbage-dumps and open back-yard outhouses.

To correct these conditions means spending money, means taxation of those who have the money, means paying decent wages so that people can live decently. But such proposals give shudders to the powers-that-be in San Antonio, those who formed the "Fight for Free Enterprise Committee" and pushed anti-labor laws through the State Legislature. *New York, N.Y.*

Who but the Negro and Mexican-American people, segregated and

discriminated against, forced into the teeming slums of San Antonio, pay with suffering and the lives of their children for the greed of the wealthy elements that rule this city? Jim-crow pays profits and Jim-Crow kills. *5-30-48*

The Worker
RECENTLY a Negro was elected to the San Antonio Junior College Board and a Mexican-American to the city School Board. It was accomplished by the unity of the Negro people, the Mexican-Americans, and all labor and progressive forces. The Progressive Party of San Antonio supported and worked for the candidates. *Dec. 22*

Such are the forces which must vigorously expose the real causes of the terrible social and health conditions in San Antonio, and win political control of this city so that they can curb the greed that kills.

The Worker
JEFFERSON DAVIS HOSPITAL ASKED TO ADMIT DOCTORS

The Worker
Houston—Several of the members of the Houston Medical Forum have applied to the Staff at Jefferson Davis hospital for admission and the right to practice in Jefferson Davis hospital. Though it is alleged that applications made in December, no action is anticipated until the medical staff of Jefferson Davis meets the latter part of January. However, there is considerable interest in the matter, and not only doctors but many other citizens, including whites, are waiting to see what the staff's answer will be, because Negro doctors have never been permitted to practice in Jefferson Davis hospital, despite the fact that it is a county and city-owned hospital.

Some of the doctors who applied were Drs. A.W. Beal, P.W. Beal, J.D. Bowles, T.A. Fletcher, E.B. Perry and F.H. Williams.

19c 1948

Hospitals (Veterans--Jefferson Barracks)

Nurse Dies: Kinsman Wars On Hospital Bias

Chicago Defender
Chicago Daily News

ST. LOUIS--(ANP) "I'll devote the rest of my life to fighting segregation in Veterans' Administration hospitals", said Edgar G. Brown here Sunday.

"My sister, Velma Mae Brown, has just died in the segregated wing of Jefferson Barracks near here. Although she served four years in the U. S. army and was retired with the rank of first lieutenant, they would not admit her to the women's ward, but put her in a room in the Negro men's ward where she was lacking any sort of decent facilities," Brown declared.

Brown said he had appealed to VA officials in Washington and to congressmen and senators to end segregation at Jefferson Barracks but to no avail.

Miss Brown, a native of southern Illinois, was graduated from Homer G. Phillips hospital as a nurse and was a St. Louis public school nurse before she went into army service where she served four years, much of the time at Ft. Huachuca.

Negroes Ask For Approval Of Health Bill Whole State Suffers Now, Speaker Says

By DOUGLAS NUNN.

The Courier-Journal Frankfort Bureau.

Frankfort, Ky., March 10.—An appeal for passage of a bill to make it possible for Negro doctors and nurses to receive training in Kentucky hospitals was coupled here today with a warning that "health can't be segregated."

The appeal was presented to a subcommittee of the House Rules Committee during a public hearing on the bill, House Bill 447. Introduced last week by Representative Sidney Baer, Louisville, the bill would permit the governing boards of hospitals to offer training to Negro doctors and nurses. Present Kentucky statutes bar such training in hospitals which train white doctors and nurses.

The bill, according to members of a delegation of Louisvillians who appeared before the committee, is primarily aimed at opening Negro wards of Louisville's General Hospital to Negro doctors and nurses. *3-1-18*

The subcommittee was told by Mrs. Hortense Young, Louisville Negro leader, that Negro doctors and nurses cannot get advanced, specialized training at present because of inadequate facilities in Red Cross Negro Hospital in Louisville. And they can't get it at other hospitals in the State because of segregation laws, she declared.

Whole State Suffers.

"But health can't be segregated," she said. "If the death rate of Negroes remains high as it is, all of Kentucky suffers."

Mrs. Young said there are only 35 registered Negro nurses and only 80 Negro doctors in the State. Many more are needed to reduce the high death rate among Negroes, she said, but added that young Negroes are reluctant to enter the two professions because of the lack of facilities.

Another spokesman for the delegation, Dr. J. A. C. Lattimore, Louisville Negro physician, told the legislators he was interested in the bill mainly "because I hope to see the younger men of my

race given better opportunities than I had." *Louisville, Ky.*
He pointed out that medicine and surgery are under constant change. But, he said, there is little chance for Negroes to receive training in the latest developments unless "they are exposed to them in the big hospitals." *3-11-48*

"All we ask is a chance to be exposed to the new developments in life-saving methods," he said.

Like Mrs. Young, he declared that the high death rate among Negroes hurts Kentucky. "Five of our babies die to one of yours," he said. "And three of our people contract tuberculosis to one of yours."

School Facilities Praised.

Dr. Lattimore praised Kentucky's educational facilities for Negroes, but he added: "What good is it to educate Negroes if they are just going to die of t.b.?"

Another witness at the meeting was Mansir Tydings, Anchorage, chairman of the Kentucky Division of the Southern Regional Council. He told the Legislators that passage of the bill would give hospitals "local option about which the Legislature has been so concerned this year." *3-11-48*

Chairman of the subcommittee, Representative Hobart Rayburn, Emerson, said his group would study the bill and report its findings to the full Rules Committee tomorrow. *Louisville, Ky.*

Ask Nurse Bias End*PM New York* CHICAGO

Members of the American Nurses' Assn. urged that Negro nurses be employed "without discrimination" in view of the shortage of trained nurses. *2-23-48*

CGN Head**Says Bias***The Defender***Falling Off**

Oct 11 1948
 NEW YORK—When the North Carolina Nurses' Association voted October 10 to admit Negro nurses, climaxing a year's preparation toward this end, it left only seven states, all in the deep south, excluding them, Miss Alma Vassells, executive secretary of the National Association of Colored Graduate Nurses, told the Defender here last week.

Although in the strongholds of bigotry, especially at Atlanta, Negro nurses are harrassed constantly by Jim Crow, many of the southern states have quietly lifted racial barriers to membership in professional associations. Among these is Mississippi. In Florida a Negro nurse is on the state board of directors and last year two scholarships were granted by the state group to Negro students.

Pointing up her indictment of Atlanta, Miss Vassells, who has just completely a field trip through the south, said that Grady hospital there "hushed up" the recent suicide of a girl in the Jim Crow nursing classes. The student, who was to have been capped a graduate nurse the following day, killed herself after a bigoted white teacher told her she would surely fail. This teacher, Miss Vassells reports, is in the habit of calling the 200 Negro student nurses "America's little black idiots."

At Grady, too, Miss Vassells was at first refused permission to speak. However, the acting director, Mrs. Timoxenia Sloan at last rescinded this rule and permitted the national nursing executive to address the student body. Despite the recent tragic suicide, Mrs. Sloan remarked: "Don't my girls look happy?"

A white teacher, Mrs. Miller King, told Miss Vassells she had left Grady because she could not stand the unfair treatment accorded there to Negro girls.

Citizens Probe Situation

A Citizens' committee is probing the suicide and mistreatment of students.

Continuing her tour of the south, Miss Vassells found the Arkansas State Nurses Association expected to lift its race barriers and in

Oklahoma found that all obstacles to Negro members attending all sessions of the state association's meeting had been overcome.

On the national scene, Miss Vassells told the Defender, the American Nurses Association has ruled that all nurses in Jim Crow states may bypass local bigotry and join as individuals. Looking around for a Negro nurse to join ANA's staff and help correlate aims of colored and white nurses, the national body has been requested to take over certain functions of NACGN, Miss Vassells said.

However, the National Committee on Structure of Nursing Organizations, scheduled to meet here in November, seeks to correlate the activities of six groups and form an organization for all American nurses without regard to race, color or creed. This would do away with the necessity of ANA taking over any NACGN functions and is the most likely development, the national executive secretary reported.

19c 1948

Physicians

PROPOSAL IS MADE TO STOP RACE BIAS

New York, N. Y.
Physicians Forum Hears Plea
to Eliminate Discrimination
Against Negro Doctors

A proposal to amend the constitution of the American Medical Association to admit to membership any qualified physician regardless of race, aimed to eliminate discriminatory practices against Negro physicians, was presented last night at a meeting of the Physicians Forum at the New York Academy of Medicine.

The proposal was presented by Dr. Curtis Flory, assistant professor of pathology at the Cornell University Medical College and

chairman of the Physicians Forum's Committee on Civil Rights in Medicine. Other speakers at the meeting, which dealt with "the plight of the Negro physician in American medicine," were Dr. Alfred E. Cohn, member emeritus of the Rockefeller Institute for Medical Research, and Dr. W. Montague Cobb, Professor of Anatomy at Howard University, Washington, D. C. Dr. George Cannon, national secretary of the Physicians Forum, presided.

Dr. Flory criticized the recent resolution approved by the County Medical Societies of both New York and Baltimore to permit Negro physicians "special membership" in the American Medical Association.

This resolution, he said, could be considered a "step ahead" only in a professional organization of which the Southern constituent societies admit openly to discrimination.

On the other hand, he added, "by the very words 'special membership' it is evident that segregation of Negro physicians will still be practiced; in fact this practice will be made easier rather than more difficult. Under this proposal, the Negro physician would still be denied the right to attend County Medical Society meetings, to be appointed to local hospital staffs requiring membership in the County Society, and to attend his rightful place in medicine."

The proposal offered by Dr. Flory would amend outright the

Says More Qualified Atlanta Daily World Pre-Med Students Needed

Atlanta, Ga.

through adequate training at the pre-medical level."

Prejudice Also May Be Called an Iron Curtain

THE cost of racial discrimination is to be measured in actual lives. This was never more flatly told than in Frankfort, where a group of petitioners appealed for the bill that would permit Negro doctors and nurses to be trained in Kentucky hospitals. If this permission is denied, it will mean the public's condoning a record that does little credit to the American idea.

Dr. J. A. C. LATTIMORE, a Louisville physician who is president of the national organization of Negro doctors, pointed out two high spots in the record. Five Negro babies die, to one white baby. Three Negroes contract tuberculosis to one white person. Here is a record of neglect, lack of facilities, lack of education and low living standards.

Its end results were described recently in *The Saturday Evening Post*, where graphic charts showed how poverty, neglect and discrimination in services take ten years off the life span of a Negro man as compared to a white man. Among women, the differential is 12 years. One hospital bed is available in the country for each 1,000 Negroes, ten for each 1,000 white persons.

What does the pending bill have to do with this record? The answer was given simply to the legislators by Dr. LATTIMORE and Mrs. HORTENSE YOUNG. Without permission to be "exposed," as they put it, to the constantly expanding developments in treatment and cure of disease, Negro doctors and nurses become the more helpless as hope expands for others. Many of the people they serve are doomed by prejudice. Too many of us who are disturbed by existence of an iron curtain in the international or political sense are oddly unconcerned by an iron curtain, just as frustrating, in the social sense.

The appeal was made in the name of simple justice and humanity. It could, quite as justifiably, be made as a practical consideration. The conservation of life has a utilitarian value, too. Whatever their race, people mean everything to the enrichment of the society in which they live and work. On this basis alone, Kentucky's bans shows a heedless waste of precious human resources. Largely because there are no means of modern training or experience, the number of Negro registered nurses is limited to 35, of Negro doctors to 80, to serve a population that approaches a quarter of a million people. *The Saturday Evening Post* article, by HENRY F. and KATHARINE PRINGLE, says as to the United States:

"We are perpetuating, through prejudice, a critical shortage of Negro doctors—a situation which contributes heavily to the high rate of Negro mortality and results in the spread of disease through colored

and white population alike. For contagion knows no color line."

Dr. H. R. Butler,

Atlanta Daily World

Former Atlantan,

Thur 1/2-16-48

Gets High Post

Atlanta, Georgia

Dr. Henry R. Butler, Jr., former Atlanta physician, was recently elected to the staff of the Methodist Hospital of Southern California, one of the large leading hospitals of Los Angeles.

Dr. Butler, who is now practicing in his specialty of Internal Medicine and Heart Diseases, settled in California after the war in which he served, reaching the rank of Lt. Colonel. He is a member of the Los Angeles County Medical Association and is affiliated with the Harvard Club of Southern California.

For his services as Assistant Chief of Medicine and Chief of the Heart Department of the 1000 bed hospital at Fort Huachuca, Arizona, during the war, Dr. Butler was awarded the Army Commendation Ribbon by General Stillwell.

Well known in Atlanta, Dr. Butler is a graduate of Harvard University Medical School, Boston, Mass and did special work in Internal Medicine, Heart Diseases, and Diagnosis in London, England, on a Rosenwald fellowship shortly before the outbreak of World War II.

At the outbreak of the war, he was practicing in Massachusetts and served as an assistant in the outpatient heart clinic at the Boston City Hospital.

Surgeons' College

Inducts 4 Doctors

ST. LOUIS, Mo.—Among physicians inducted at the 13th annual Convocation of the United States Chapter of the International College of Surgeons at the Kiely Auditorium, last week, were:

MATRICULATE—Dr. Watson H. Walker, St. Louis, Mo.; AFFILIATES—Dr. William F. Goins, Detroit, Mich.; Dr. Charles H. Garvin, Cleveland, Ohio; ASSOCIATE—Dr. Fitzroy E. Younge, Oakland, Calif.

Tuskegee Decides On Site, Funds For Hospital Building

TUSKEGEE, Ala., Jan. 3—First definite step toward obtaining a hospital for Tuskegee was taken this week when the City Council and the Board of Revenue decided on a site for the institution and appropriated \$5,000 each toward start of construction.

Word was received from Washington, through Cong. George Andrews, that equipment from the Tuskegee Army Airfield Hospital had been transferred to the joint hospital enterprise.

The site selected is on the shore of the lake approved by voters of Tuskegee at last week's referendum. The land was donated by H. A. Vaughn without specification as to size. Mr. Vaughn told the meeting that he would donate any size plot the group felt was needed for the hospital.

His offer was accepted after consideration of one or two other sites, offered at prices ranging up to \$10,000.

The hospital site is just off the Tuskegee-Auburn Highway and less than one mile from the city square. It is considered an ideal location because of its proximity to the heart of the city and the fact that it will not be near heavy traffic.

Agreement on a hospital site culminates about two years of negotiations between the city and county on means of establishing a hospital so as to take advantage of the offer of the Army Air Forces to turn over the airfield hospital equipment for local use. The equipment is valued at approximately \$60,000 and is given to the city-county hospital without cost.

TUESDAY AND HOSPITALS

Twice has Montgomery County rejected plans for building a hospital. Nobody ever denied that a hospital was needed, but few people voted in the referenda to erect one. Eventually, of course, the hospital will arise. On Tuesday we will have an opportunity to give the project an indirect boost.

That is by voting for Amendment No. 5. This does not impose any new taxes. What it does is to empower counties to raise revenue with which to match federal funds for hospital building.

As a matter of fact, the amendment doesn't change a thing in Montgomery County because we empowered the county to do this sometime ago. Amendment 5 only extends that power to other counties, giving them authority to vote later in the county for or against a local hospital tax.

But back to our contention that it will

have an indirect effect on Montgomery's hospital problem. Under the provisions of the Hill-Burton hospital bill, there is federal money free for the local matching. Washington will give one third of the hospital cost if the remaining two thirds is raised locally. The hospital, of course, is required to be non-profit.

Montgomery stands to gain a 152-bed hospital for Negroes. This Negro hospital, plans for which have already been approved by Washington and the State Health Department, will be operated by St. Jude's.

It would be a \$1,312,360 infirmary. It would cost no tax money, as the Catholics themselves will raise the two thirds to match Washington's one third.

Apart from St. Jude's, a favorable vote Tuesday will assure \$7,338,672 worth of new hospitals in Langdale, Birmingham (four), Mobile (three), Opp, Selma and Ensley.

Dependent upon favorable action are \$7,601,197 projected hospitals in: Fort Payne, Opelika, Ashland, Decatur, Sylacauga, Gadsden, Athens, Oneonta, Hamilton, Marion, Cottage Hill, Ozark, Vernon, Chatom, Aliceville, Evergreen, Union Springs, Cullman.

All of us, of course, want these cities to have the opportunity to erect hospitals with local taxes. That is a matter of local option in which we wish them well.

It would probably alleviate the crowding of some of Montgomery hospitals.

But what further appeals to us is that the conspicuous sight of all these hospitals ringing this county and providing examples of what can be done will make this county more than ever aware of its need.

New Negro-Staffed Institution Slates Training of Nurses

Special to The Courier

BIRMINGHAM, Ala. — A completely Negro-staffed first-class hospital, an institution for the training of Negro nurses, is about to become a reality in Jefferson County. On July 2, ground will be broken for Birmingham's first regular Negro hospital.

Citizens have dreamed for years of the day their doctors could follow their patients in a completely modern and fully equipped hospital. The building has been in the planning stage since the ADVANCE DONORS.

Sisters of Charity of Nazareth came to Birmingham in 1941 from Kentucky and established a clinic at the Holy Family Mission in Ensley at Tuxedo Junction.

CAMPAIGN OPENS

A campaign to raise \$250,000 opened this week to add to the \$60,000 now on hand to construct the first wing of the building. The first unit will have sixty beds. It is expected, when their will offer all types of hospital pledges have been completed, to care. When the entire hospital is completed, it will have 200 beds and become the largest in the South for Negroes.

The present hospital contains only twelve beds and the staff consists of five sisters, two Negro nurses, twenty-two Negro physicians and four white physicians.

Heading the campaign committee are Dr. E. H. Ballard, Dr. L. F. Swann, H. D. Coke, William Childs, Atty. A. D. Shores, C. J. Greene, Mrs. Odessa McKinney and a host of other outstanding business, professional, labor and other citizens.

The white division is headed by Harry Fogarty and Jack Keelan.

OUT-PATIENT CLINIC

The hospital, designed by Architects Pembleton and Mins, will be on the corner of Twentieth Street and Avenue S, Ensley. It will be of masonry and steel throughout and will be fireproof. The building will be three stories high with the first floor given over to administration and an out-patient clinic.

The first floor will also house an emergency room and a class room for student nurses, operating rooms, an X-ray department and a nursery.

Upon completion of the new unit, the present wooden structure will be moved to the back of its present location and used for an Old Ladies Home.

The hospital campaign was announced by Sister Mary Octavia, superior of the mission. The hos-

Tension Grows After White Strikes Maid

Many Groups Protest As Board Faces Dope Charge To 'Cover Up'

MONTGOMERY, Ala. — The exchange of angry words and blows between a white nurse and Negro maid, while both were on duty at the Montgomery Tuberculosis Sanatorium, Friday, August 27, resulted in the mass dismissal of 11 Negro practical nurses Tuesday, August 31, by Dr. R. K. Oliver, director of the institution. The maid was struck by the nurse and a white male patient. Her screams aroused the nurses who sought to learn the cause of the disturbance but they were rudely threatened with the same treatment given the maid.

Later, Charles Wampold, president of the Sanatorium Board, was informed of the incident. No action was taken until Dr. Oliver returned from his vacation August 31. He had a conference with the white staff, and immediately afterward called in the colored nurses on duty and dismissed them. Those on duty and on vacation were given notice by telephone or message. They are as follows: Miss Essie Trawick, Mrs. Amy Howard, Mrs. Marie London, Miss Tessie Ola Farrior (on vacation), Mrs. Elizabeth Carter, Miss Rosa Gilmore, Mrs. Louvenia Lewis and Mrs. Works (on vacation), Mrs. Rebecca Branch, Mrs. Gertrude Bracy and Mrs. Carrie Long. Mesdames Long, Branch and Bracy were off duty at that time. Dr. Oliver gave no explanation for his action, nor did he give the nurses a chance to defend themselves against this unfair treatment.

Board Backs Director

The Board of Directors upheld Dr. Oliver's action, but denied that the altercation between the maid and nurse was the reason for it. The dismissed nurses were publicly charged, through the local press, of general "incompetency." Mention was made of missing narcotics, and the fact that at least two of them had access to the drug cabinet. The nurses denied having "boasted that they would not permit the employment of white nurses by the institution," as charged in the investigation report. There was no explanation for only recently finding out the "incompetency" of persons employed by the institution for sev-

eral years. Their record of employment is from three months to 15 years.

Tues. 8-24-48
Frown On Chest Drive

This ugly affair has caused many colored citizens to declare their unwillingness to contribute to the Community Chest drive for funds which help support the sanatorium. Some of the "Colored Division" workers are very reluctant to serve in the drive.

The Alabama NAACP, headed by the local and state president, E. D. Nixon, representing ministers, labor unions, religious, social, business, professional groups, fair-minded and right-thinking people of all races protested "the injustice against these nurses who dedicated themselves to caring for unfortunate victims of a most dreaded disease. Dr. Oliver's action was a grievous error. The Board of Directors was most unjust in sustaining him . . ."

The News - Tues. 8-24-48 - Tuskegee, Ala. Tuskegee Mighty Proud Of Helping Self Without Asking Uncle Sam's Aid

TUSKEGEE, Ala., Aug. 24—citizens. H. A. Vaughan donated the land for the hospital site and part of the lake.

Among other donors were W. A. Campbell, "Mott" Wadsworth and John Slater.

Plans for the lake include a boat-house to house 25 or 30 boats, a three-mile scenic drive around the lake and a stock of bass and bream.

* * *

This hospital will be unusual among several now being planned and constructed in Alabama towns and rural areas.

The \$200,000 which it will cost is "in the bank," says enthusiastic Mayor Frank Carr.

While other towns pinned their hospital hopes on help from a federal grant, Tuskegee and Macon County raised their entire \$200,000 locally.

Tues. 8-24-48
MAYOR CARR SAYS a lot of credit for Tuskegee's "sound financial condition" is due to city ownership of its public utilities—light, power and water.

A five-mill ad valorem tax, the mayor says, is now levied in the town but Tuskegee expects to be part tax-free within the next few years.

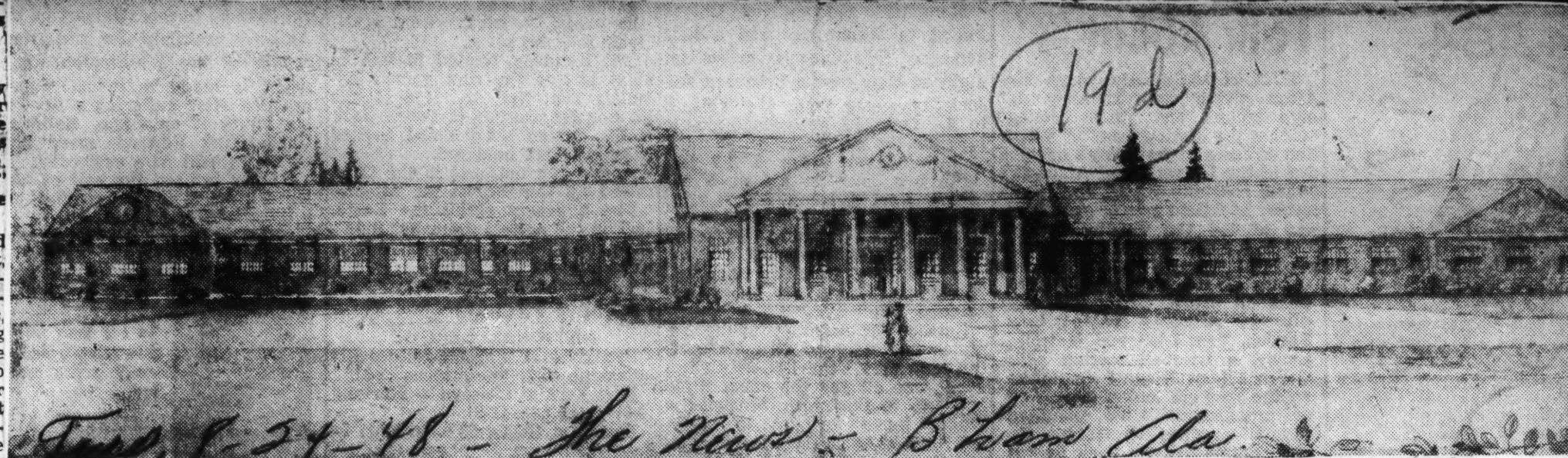
The city-county hospital, for which grading is now underway, is expected to have one of the most convenient layouts of any hospital in Alabama.

A one-story building, it will cover about 20,000 square feet of floor space, including two wings, one for white and the other for Negro patients.

Tues. 8-24-48
In the center of the building will be operating, X-ray, consultation and administrative rooms.

* * *
THE LAKE which it will overlook is another new city project, planned to serve as a reserve water supply and a recreation center.

The lake covers 100 acres of land, most of it donated by Tuskegee



TUSKEGEE CITIZENS SHAPE OWN CIVIC FUTURE — The drawing (above), by Architect Marshall J. Conner, shows the new 80-bed, city-county hospital to be constructed this Fall and Winter in Tuskegee. Citizens of the town and of Macon County are proud that they asked no federal funds for the \$200,000 building but raised its entire cost locally. The hospital will overlook a new, man-made lake, for which land was donated by Tuskegee citizens as a reserve water supply and recreation area.

Slossfield Maternity Hospital Will Stay Open; Federal Funds Granted

Birmingham, Ala.
Slossfield Maternity Hospital, slated to close Saturday, will remain open another five or six months with funds from the U. S. Children's Bureau.

This was the message brought to city and county commissioners yesterday by Health Officer George A. Denison, who originally had not asked for federal money to keep the hospital in operation.

Dr. Denison was summoned by commissioners to explain why a request was not originally renewed for the \$20,000 which the federal government has given the hospital each year.

He told them the request has now been made and the Children's Bureau agreed to take on sole support of the hospital for as long as the \$20,000 lasted.

All six commissioners told the health officer "keep it open."

Dr. Denison estimated the money will last five to six months, and commissioners pointed out this will operate the hospital until time for the city and county to approve a new Health Department budget.

COMMISSIONERS INDICATED they will then request some local funds be used to keep Slossfield open.

Local governments provide a major share of funds for the Health Department but cannot dictate directly how the money shall be spent. However, Dr. Denison said he would follow their wishes.

The health officer told commissioners his department has spent \$23,700 on Slossfield in the current fiscal year which was \$10,000 more than was budgeted for it. Total cost of operating the hospital for the year was around \$43,000, he said.

Dr. Denison explained that he, State Health Officer D. G. Gill and a representative of the Children's

Alabama (Slossfield)

Bureau first decided not to request federal money for the hospital because:

1. It would cost \$60,000 to operate Slossfield with major surgery equipment, and this amount was "not justified because of the small size of the institution." Slossfield now has 14 beds.

2. The federal government has cut its appropriation to the State Health Department, which, in turn, cut the local health department by \$10,000.

6-16-48
Dr. T. M. Boulware, who supervises the hospital, said he will obtain a Negro resident doctor despite the fact that the institution offers no major surgery experience.

Heretofore, local Negro doctors have been serving Slossfield on a fee basis.

In a statement, Dr. Denison said:

"The operation of a maternity hospital on a service basis is, quite definitely, not the function of a health department.

The Board of Health has been interested in some adequate hospital facility in which Negro physicians can practice but it cannot withdraw funds from tuberculosis and venereal disease control, milk and food control and other general and essential public health programs in order to provide a hospital service."

6-16-48
CITY COMMISSIONER James W. Morgan then proposed that the city help Negro citizens establish their own Negro hospital here by donating the ground it owns where Slossfield clinic and hospital now are located. Other commissioners said the idea should be considered.

The maternity hospital, established in 1941, is the only hospital in the city where a Negro doctor can deliver a baby. Its record of cutting down maternal deaths among the Negro population has been nationally recognized.

Slossfield Closes Its Doors

Last June the health officer of Jefferson County announced the impending shutdown of the Slossfield Maternity Clinic. It was then the only accredited hospital in Birmingham to which Negro doctors might take their obstetrical cases. There was then and there is now no other place to which a Negro woman can go for birth of a baby and be attended by her own Negro physician in an accredited hospital.

The City and County Commissions met with Dr. Denison, discovered that he had not applied for federal funds available to help maintain the clinic. He was requested to make such application immediately and to continue the hospital so long as those funds—\$20,000—lasted. Before they were

expected to be used up in January, both city and county intimated strongly that local

funds would be found in the new budgets to keep the clinic open.

* * *

Now comes the sudden announcement that the Board of Health has closed the hospital permanently. The reason given at this time is that the resident physician supplied from Meharry Medical College for Negroes has resigned and that half the staff of Negro nurses has also resigned. Dr. T. M. Boulware, white senior consultant, has agreed that it is necessary to discontinue all activities in the maternity clinic.

City and county officials have known of the impending move for only a few days. They do not look hopefully toward any chance to reopen the institution. The unused portion of the federal funds has been returned to the Children's Bureau, from which it came.

So the 210,000 Negro citizens of this county have no accredited hospital in which expectant mothers can be attended by Negro doctors. There is a small clinic maintained by the Community Chest. It is inadequate and unaccredited. The Holy Family Hospital in Ensley can care for a few more, but it also is not accredited. However, there is at present a campaign in progress to raise funds for the erection of a 75-bed hospital on the site of the present Catholic institution. When it is finished it will provide much-needed space for all sorts of medical and surgical practice, including obstetrics. But it cannot be ready for many months to come.

Meanwhile Negro patients are accepted in Hillman-Jefferson, but there they are attended only by white physicians assigned to the cases. Eventually it is hoped that space will be found in Hillman for a Negro section. That, too, seems far in the future.

* * *

The situation is desperate and dangerous. Well-trained Negro doctors are unlikely to come to Birmingham to practice as long as they cannot use any hospital facilities for their patients. There are now only 26 practicing doctors for the whole Negro population.

It is regrettable—indeed tragic—that means of keeping Slossfield open have not been found. Work on providing adequate hospital facilities for Negro doctors and Negro patients should proceed at once.

Would Shutdown Pittsburgh Clinic Only One Where They Can Work

Sat. 6-12-48

(Special to The Courier)

BIRMINGHAM, Ala.—Aroused citizens were protesting announced plans to shut down the fourteen-bed, seven-year-old Slossfield Maternity Hospital here June 19.

The Mineral District Medical Society, headed by Dr. P. S. Moten, is spearheading the drive. Other organizations like the NAACP, the labor unions, newspapers, women groups and churches are waging a vigorous fight to save the Maternity Hospital.

Sat. 6-12-48

Dr. George A. Denison, local health officer, in an announcement last week said that the hospital, which receives matched funds from the United States Children's Bureau said that the shutdown action followed a conference with State Health and Federal Officials and him in Montgomery. Lack of funds was blamed for the close down.

In a prepared statement issued June 5, the Mineral District Medical Society charged "that no formal request for funds was made to the Children's Bureau for the maintenance and expansion of Slossfield Maternity Hospital."

Negro doctors, because of racial discrimination, cannot make deliveries in the tax-supported and other accredited hospitals. Slossfield is the only certified one where they can work.

community; there is no possible chance for Negro doctors to secure advanced training in obstetrical work in Birmingham except at the clinic; no Negro doctor can practice in any approved hospital in Birmingham.

Birmingham, Ala.
The local Health Department has announced the closing of the clinic and the termination of the fine work it has been doing because funds are not available to expand its work, or even to maintain it on its present basis. The amount required is about \$50,000 for the next fiscal year. Unless that sum is provided there will be no approved clinic for Negro mothers. Health standards, which have been raised, will probably begin to slip backwards. Can the community afford to allow the clinic's work to cease? Public money seems to be unavailable. Private financing might not be feasible, but no effort has been made to secure private funds.

Unless the established high standards can be maintained, the clinic had best be discontinued. That is the feeling of those who have worked with it during its eight years of existence. Without the money, the standards cannot be kept up. The money is not forthcoming. The clinic is shutting down.

The News Must The Clinic Be Closed?

Birmingham, Ala.
Certain developments in relation to the proposed closing of the Slossfield Maternity Clinic came to light over the week-end. According to the news story released to the press some days ago, the reason for the closing was a lack of funds. Up to this time \$20,000 a year has been provided by the Children's Bureau of the United States Public Health Service. On May 28 a meeting was held in Montgomery which was attended by Dr. George Denison, city-county health officer; Dr. D. G. Gill, state health officer, and Dr. Lucile Marsh, regional officer of the Children's Bureau, whose office is in Atlanta. At that meeting the future of the clinic was discussed.

Tues.
The impression was obtained by many that the request for funds with which to continue the work and to expand it to include certain necessary surgical facilities was rejected by the Children's Bureau. It now is reported that no such formal request was ever made.

The matter was talked over. Dr. Marsh pointed out that the hospital is small—only 14 beds. It was her opinion, it is said, that the Children's Bureau might not appropriate the funds to set up a surgical clinic for so small an establishment. If the hospital were larger—if, say, it had 20 beds—it would serve the community better. But no decision to enlarge it was reached, and the Children's Bureau apparently has not been asked what its attitude toward supporting a larger hospital would be.

In any event, Dr. Marsh is not the final authority. She has the power to recommend, but the final decision comes from the bureau's office in Washington.

The Washington headquarters has never

been asked formally whether funds would be forthcoming to increase the facilities of the hospital as it now stands or as it would be if the number of beds in the hospital were increased.

The decision not to request funds this year was made by Dr. Denison, Dr. Gill and Dr. Marsh. It was their decision to close the present facilities this month without making a formal application to the Washington office of the Children's Bureau.

* * *

Meanwhile Negro doctors in Birmingham are vigorously protesting the shutting down of the clinic. They point out that the decision was made suddenly—so far as the public knew or so far as they knew—and that they had no opportunity to present their reasons for maintaining the clinic. They have asked that it be held open at least till the middle of July, thus providing them and other interested persons an opportunity to check into the matter thoroughly and explore all possibilities of keeping up the work done by the clinic. It is sorely needed in Birmingham.

Tues. 6-8-48
This paper hopes that every means to keep it in operation will be thoroughly explored before the clinic is actually discontinued.

Birmingham, Ala.

The News Federal Funds Still Available To Slossfield

Birmingham, Ala. delegation of Negro doctors yester-

The U. S. Children's Bureau is day in Montgomery by Dr. D. G. still willing to put \$20,000 a year in—Gill, state health officer.

to operation of the Slossfield Maternity Hospital here, slated to close June 19.

This was the message given

George Denison, of Jefferson County, said his department could not put up any matching money.

* * *

FORMERLY, THE COUNTY Health Department has put about \$16,000 a year into operation of the 14-bed hospital for Negro mothers.

Dr. Denison has said that new expenses, rising costs and a cut in the Health Department budget made it necessary to stop the Slossfield appropriation.

Wed. 6-9-48
Dr. Gill said yesterday that the Children's Bureau would continue to put up \$20,000 if any local agency, public or private, would underwrite the remainder of the expense, which he said is about \$16,000 a year.

* * *

NEGRO LEADERS PLAN to ask city and county commissioners if they can provide any funds for the maternity hospital, which has been operating since 1941 with a remarkable record in maternal health.

Wed. 6-9-48

If the hospital is closed, patients who would have been taken care of there will be channelled into the already-overcrowded facilities of Hillman Hospital.

Wed. 6-9-48
Dr. Gill told the delegation that he would ask the Children's Bureau for enough money to keep the hospital open until July 19 if there seemed any hope of raising local money to help operate it.

TT SEEMS TO ME—

The News Closing Of Hospital Means More Deaths

Tues. 6-8-48

BY ALYCE BILLINGS WALKER

Announcement that Slossfield Maternity Hospital closes its doors June 19 brings us face-to-face with one of the gravest situations in our local health picture.

Reason given for closing the hospital is "it has fulfilled its original purpose as a training ground for local Negro physicians." Records show it has been beneficially used. Not only did Negro doctors have a place to practice, but of 3,200 deliveries in the past eight years, there were only three maternal deaths.

Wed. 6-9-48
BUT WHAT GOOD is a "training ground" if there's no place to practice your training? And that's the situation Negro physicians find themselves in here.

Wed. 6-9-48
Back in September, we carried in this column comments on the 1946 maternal mortality report compiled by a committee from the Jefferson County Medical Society and Board of Health. It revealed that the county's maternal death rate was 2.3 in 1946, below the national average. But, it would have been better, said the report, but for (1) prevalence of criminal abortion and (2) lack of hospital facilities available to Negro physicians.

At that time, Dr. T. M. Boulware, committee chairman, told me that at most there were 50 hospital beds in the county available to Negro doctors. Closing of Slossfield cuts this number down. Furthermore, the Slossfield beds were among the more "desirable" beds available.

Wed. 6-9-48
There was more equipment at the Slossfield hospital, higher standards of cleanliness and service Negro physicians had to turn their "available patients over to white physicians hospitals" can offer. But even so, in most obstetrical emergencies records for that year showed Negro physicians had to admit Negro patients where facilities were more adequate.

Wed. 6-9-48
months was reached at a joint meeting between city, county and health department officials. The meeting was called at the insistence of Birmingham and Jefferson County commissioners who yesterday following a one-hour discussion agreed at a joint session of the matter that the hospital would continue to request continued operation.

Wed. 6-9-48
The meeting was called at the insistence of Birmingham and Jefferson County commissioners who yesterday following a one-hour discussion agreed at a joint session of the matter that the hospital would continue to request continued operation.

Prospect For A Negro Hospital

It is certain that the Slossfield Maternity Clinic will remain in operation for at least five months on the appropriation of \$20,000, from the funds of the Children's Bureau of the United States Public Health Service.

If the attitude of the six city and county commissioners remains unchanged from that expressed at a special meeting Tuesday afternoon, it is assumed that funds will be provided in the budget of the city and that of the county to keep the clinic open till June 30, 1949. What will happen thereafter is problematical. *Thurs. 6-17-48*

The situation presents serious implications for public health in Birmingham. At present there is no accredited general hospital in the city where Negro doctors can send their private patients and continue in charge of their cases.

* * *

There is the Holy Family Hospital for Negroes in Ensley. It is doing a good job with extremely limited facilities, but it is not yet accredited by the American Hospital Association.

There is the Children's Home Hospital in Smithfield, supported by the Community Chest. It is small, badly equipped and not accredited.

Several years ago there was a public drive for funds with which to establish a Negro hospital on the Southside in the general neighborhood of the University's Medical School. Enough money was raised to purchase a site. The ground was bought, but no further progress has been made. No other funds are available for the project and the several hundred thousand dollars needed to activate it are not likely to be raised soon. *6-17-48*

Tuesday afternoon Commissioner Morgan suggested that, inasmuch as there was a start for an enlarged hospital at Slossfield, the city might consider donating the site for the establishment of a larger hospital to be equipped for general practice of medicine and surgery. Other commissioners expressed interest.

There is not the slightest doubt that such an institution is very badly needed. The question is, however, whether the site is appropriate for such a hospital and whether it could be set up within the financial means of the county and the city. The present building is small—only 14 beds—but it is not readily suitable for additions. Other buildings on the site are larger and might be used, although none is entirely desirable for the purpose. Furthermore, the location is a long way from the Medical Center and would be inconvenient for the staff, some of whom would have to be the white doctors.

Therefore it is excellent news that the Holy Family Hospital in Ensley is to be greatly enlarged and placed, it is expected, on an accredited basis by the American Hospital Association. The present frame structure of that institution will be eventually abandoned as a hospital and the nurses and patients will soon be housed in a new and modern structure to be built this Summer and Autumn.

There is already an excellent start on the project. The site for the new hospital is chosen and clear of debt. There is a sum of money already on deposit in the bank,

but it is not enough. A drive for further funds will start shortly. Negro medical and business leaders are enthusiastic over the prospects and much of the money needed will come from the Negro community. A smaller portion of it will be asked for from white citizens of Birmingham. Other funds will come from Catholic charities in other parts of the nation. *The News*

The new building will provide for 60 beds in the first structure to go up. Later it will be further enlarged. *Wed. 6-23-48*

Although the hospital will be managed by the Catholic Church, it will not in any way restrict its services to members of that religion. Its purpose is humanitarian. The Catholic Church has had much experience, here and in many other cities, in managing hospitals; its background of knowledge is secure and great.

* * *

The new project will relieve, at least in part, a situation rapidly becoming intolerable in Birmingham. Given a place to practice, more well-trained Negro doctors of ability will be attracted to Birmingham.

Such men now in Birmingham have been overworked and, at the same time, severely handicapped. *Birmingham, Ala.*

We welcome this addition to Birmingham's medical resources. It is sorely needed.

The Slossfield Clinic

The news that the Slossfield Maternity Clinic will be closed on June 19 comes as a shock to most of Birmingham's citizens. The clinic has done a good service. It has provided the only acceptable place for obstetrical practice by Negro physicians. Its record is excellent. In eight years of operation, with a total of more than 3,200 deliveries, there have been only three cases of maternal death. There may be certain exceptions, but the record is so good which do not apply to other hospitals, but no matter how the matter is considered, the fact remains that the clinic has done much to raise the standard of practice among Negro doctors. *Thurs. 6-3-48*

There seem to be almost insuperable difficulties faced by those who have worked so hard at the clinic. The News believes the most exhaustive study should be made of the problems which have presented themselves and every feasible effort continued to find a way of keeping this good work going.

Funds For A Clinic

The story behind the decision to close the Slossfield Maternity Clinic in another week is developing new facets. A delegation of Negro doctors and ministers called on Dr.

D. G. Gill, the state health officer, in Montgomery, one day this week. They took with them a petition signed by nearly 7,000 persons asking that the clinic be continued if at all possible. *Birmingham, Ala.*

Dr. Gill informed them that no formal request has been made to the Children's Bureau of the United States Public Health Service as a result of Dr. George Denison's statement that the local city-county health board could no longer contribute anything to the clinic's upkeep. In recent years it has appropriated \$10,000 a year, but has had to put in a considerably larger sum than that because of increased costs which affect all hospital operations. *Thurs. 6-12-48*

Thus the decision to close the clinic has apparently resulted from the local health office's feeling that it could no longer afford to contribute anything at

all for this fine work. Dr. Denison calls attention to the fact that his over-all budget is not increasing and that there are numerous other functions that the Health Department performs, such as child welfare clinics, dental clinics, and food and restaurant inspection, which cannot be curtailed without danger to the whole community. *Birmingham, Ala.*

Dr. Gill is of the opinion, however, that the sum of \$20,000 is still available from the Children's Bureau if asked for. If local funds can be found, that amount may be expected from the federal government. It is not enough, however, even to maintain the present facilities, and possibly as much as \$30,000 or even \$40,000 is needed from outside the city and state if any surgical facilities, so sorely needed, are to be added.

The hitch is then seen in lack of local funds. Dr. Denison says he cannot provide them—not even those provided in the past. Without money, the clinic must close. Where is the money to keep it open to be found?

Thanks From Slossfield

To the Editor of The News:

On behalf of myself and the other personnel of Slossfield Maternity Hospital, I want to sincerely thank your paper for the editorial efforts in our behalf. I feel that we should be especially grateful to Mr. Douglas Hunt. I am quite certain that the publicity you gave this problem was the first real stimulus in the direction of its temporary solution.

John F. SULLIVAN, M.D.
Senior Consultant in Obstetrics, Slossfield Health Center.

Closing Slossfield

To the Editor of The News-Age-Herald:

The closing of the maternity hospital at Slossfield comes not so much as a shock to the Negro physicians of Jefferson County as an unwarranted accident with calamitous results. Ever since the organization of the Slossfield project the Negro physicians of Jefferson County, through their organization, the Mineral District Medical Society, have cooperated in sponsoring and making possible the splendid record of achievement. By this token the institution has become tied in with their highest hopes and aspirations.

Under the guidance of Dr. T. M. Boulware and his assisting consultants, Slossfield has become an outstanding organization of statewide, national and international notice.

The most poignant reaction will come from the 100,000 Negroes of Jefferson County who have come to regard this center with peculiar pride, not so much as something they owned and developed, but as something which men like the late W. D. Moore, Dr. Dowling and the Jefferson County Board of Health gave them as an endowment to have and to hold in trust.

Birmingham

Is it possible to close the door of this maternity service in the face of a possible waiting list of 2,000 indigent and part-pay women who need and desire so much the sympathetic service of their own kith and kin? Of course they could go to Hillman-Jefferson Hospital for free service, but as they go they carry with them the fears and burdens of Southern traditions and customs, and to give birth under these complexes means more than one would ordinarily estimate.

NEWS
There seems to be three reasons mentioned for the closing of the Slossfield Maternity Center. All of these, to our way of thinking, are untenable and, I fear, will not bear an unprejudiced investigation.

Slossfield maternity center as a teaching institution has not completed its assigned task since there has been little or no practical laboratory training for the Negro doctors of Jefferson County in pathological obstetrics. Granting this branch of medicine to be progressive, could there be any finished teaching tasks in this field?

Sun. 6-13-48
Is it possible that money, with or without expansion at Slossfield, is the real cause for the shutdown when there is more money in our state treasury than ever before? The Children's Bureau of the Department of Labor at Washington, which has been assuming the major part of the burden at Slossfield, is anxious to increase its appropriation to Slossfield.

Let it be noted that there is plenty of room at the Slossfield center to expand from a 14-bed hospital to a 28-bed hospital, if we can find the will and desire to do so.

The closing of the maternity center at Slossfield has been a question of discussion for two years, and at each period of discussion some way was found to keep the institution open, even at the severest sacrifice on the part of the Negro physicians of Jefferson County. At each time they were warned, and through this warning they were able to meet the crisis. But this time they were not given any advanced warning, and hence there was no one at the sitting of the court to plead for our beloved Slossfield maternity center.

WALTER L. BROWN.

1032 North First Street.

Hospital For Negroes

To the Editor of The News:

This society begs leave to express through your columns its sincere thanks to all those in our community who joined in the fight to save Slossfield Maternity Hospital: the more than 10,000 public-spirited citizens of all creeds and races who signed petitions against its closing; the newspapers which carried impartial facts of the case; the radio stations which carried spot announcements; the radio sponsors who gave up their time that the plight of the institution might be aired; the clergy of our city who joined the crusade; the labor unions who worked in the cause, and who threw the weight of their offices into the fight to keep open this hospital which has so significantly served the community.

This working together of divergent elements for a common worthwhile cause is democracy at its ultimate best and will go far toward offsetting some of the adverse publicity which our community has recently received.

Birmingham
To all these friends of good health we would point out, however, that the battle is only half won. The money appropriated by the Children's Bureau will not suffice for more than four to five months. Long before this time the necessary additional funds should have been raised.

Then there is the question of expansion. Slossfield Maternity Hospital could serve with considerably more effectiveness if surgical facilities were added and its bed capacity increased.

June 25, 1948
In addition to the maternity hospital there is in Birmingham an urgent need for an approved general hospital where Negro citizens may be served by the physicians of their choice. As is well known, no Negro physician may treat his patient in any of the existing approved hospitals. This state of affairs not only robs the Negro physician of an opportunity to improve his skill, but it necessitates the transferring of a critically ill patient to the care of a total stranger. All psychologists will agree that this is psychologically bad for the patient.

We invite our commissioners who are in favor of the hospital idea to consider Slossfield as a site for such a venture. The buildings are at present: (1) An auditorium now hardly used, and (2) the hospital originally used as a rapid treatment hospital by the Midsouth Medical Center, now being used as a mechanical training center. Also, additional floors can be added to the buildings already present. The cost should be negligible in terms of the potential service the hospital would render the community. We further urge our city fathers to investigate the possibility of securing the necessary funds from federal sources available under the bill co-sponsored by our own Sen. Lester Hill. A general hospital at this site would do much to relieve the congestion at Jefferson-Hillman, which is inadequate for all our people.

This hospital would stand as a monument to good will in our community. It would place Birmingham squarely in the company of progressive Southern cities, keenly interested and solicitous of the health needs of all their citizens.

We all rejoice that Slossfield Maternity Hospital has been temporarily salvaged. Let us complete this job of health building.

P. S. MOTEN, M.D.,
President, Mineral District Medical Society.

L. F. SWAN, M.D.,

Chairman, Public Relations Committee.

Slossfield Clinic Is Saved

Birmingham
At a meeting of the combined City and County Commissions on May 28, Cooper Green's office Tuesday afternoon a definite decision was made to continue the operation of Slossfield Maternity Clinic for at least five months after July 1. Dr. George Denison, city-county health officer, was present and agreed that such operation was feasible on the basis of a grant of \$20,000 from the Children's Bureau of the United States Department of Health. That money is forthcoming, Dr. Denison reported. Before the five months' period has expired, both city and county will have made up budgets for their next fiscal years. In those budgets it is hoped that amounts will be set aside to continue the operation of the clinic through the rest of the year till June 30, 1949.

The meeting in Mr. Green's office followed a similar one held on Monday. At that time the six commissioners voted unanimously to ask Dr. Denison to postpone closing of the clinic until the commissioners had a chance to meet with him and discuss the situation fully. The commissioners then had indicated a feeling that they had a right to know what the plans for the clinic were in advance of a definite statement that it was going to close. That decision, it will be remembered, had been made suddenly, so far as the public and many city and county officials knew. Inasmuch as funds to maintain the clinic come in part from city and county tax sources, the officials of the two divisions of government felt that they had a right to know what prompted the decision to shut down the clinic's facilities. They admit that they have no control over how such money is spent by the Health Department. But they feel that such a tremendously important decision should not have been made without their knowledge.

Dr. T. M. Boulware, senior consultant at Slossfield Clinic, says that he now can go ahead with his plans to bring in a Negro resident physician from Meharry Medical College in Nashville. Such an official is necessary to the maintenance of the clinic on a satisfactory basis.

Jul. 6-16-48
The six commissioners had not known that no formal request for continued financial aid had been made to the Children's Bureau until they read the statement in the press. They showed consternation over the fact that the sum of \$20,000 was available for the asking. Although that amount is insufficient to carry the work of the clinic for more than a part of the year, the commissioners felt that it should not be released to some other agency simply for lack of the asking.

These matters were brought specifically to their attention Monday when a group of labor leaders representing the city organization of the AFL met with the commissioners. These men requested that all avenues looking to maintenance of the present service be fully explored before the clinic was closed. Dr. Denison was asked to meet with the commissioners, and out of that meeting came the resolution to go ahead with the clinic's service to the community.

**Macon Hospital
~~The Advertiser~~
 Construction
~~Tuskegee, Ala.~~
 To Start Soon**

19d
**\$100,000 Appropriated
 By Revenue Board,**

City Council

Sun. 1-25-48

TUSKEGEE, ALA., Jan. 24 —

Early start on construction on the joint city-county hospital here moved a step nearer this week as appropriations of \$50,000 each were made by the city council and the board of revenue. This brings the total amount available to \$110,000 since previous action by the two groups had set aside a joint fund of \$10,000 for moving the buildings and equipment from Tuskegee Army Air Field.

Meanwhile, formal transfer of the hospital equipment to the city and county was expected to be effected after a conference this week between officials here and representatives of the War Assets Administration, which is handling disposal of the equipment.

Mayor Frank H. Carr and Floyd Foreman were named by the city and county governing bodies to constitute a committee to supervise arrangements for the hospital. Dr. Murray Smith, county health officer, accepted their invitation to serve with them.

These developments, which virtually assures early start on the hospital project, resulted from a joint meeting of the city council and board of revenue this week.

The committee empowered to launch the hospital project was to confer also with Mr. Singleton, of the state health department, who notified them he would bring suggested plans for a suitable building. *The Advertiser*

The committee also may visit other small hospitals in the state before forming final plans for the local hospital. *Sun. 1-25-48*

A site for the hospital on the shore of the new city lake, soon to be completed, was selected several weeks ago and work of clearing the tract will start soon. Mayor Carr said about eight acres will make up the hospital ground. *Tuskegee, Ala.*

The entire tract for the hospital was given without cost by H. A. Vaughan, who told the city and county group that he would donate any amount of land they felt was needed.

Hospital in Arizona Smashes Race Bias

PHOENIX, Ariz.—Four Negro girls from widely different parts of the country were among the twenty-one nurses graduated July 1 from St. Monica Hospital here, first hospital in the United States to open a school of nursing with the definite policy of admitting all races.

The students who earned diplomas after three years of study include Mildred Jones of Baton Rouge, La., class vice president; Elizabeth Rose Brown of Detroit, Mich.; Georgia Louise Dickson of New Iberia, La., and Ida Lee Elkins of Cleveland, Ohio. This class is the second to take complete training at St. Monica.

POLICY SPREADS

On the eve of the graduation exercises, the Rev. Emmett McLaughlin, O. F. M., hospital superintendent, learned that the hospital's interracial program had been adopted in another section of the country.

St. Luke Hospital in Spokane, Wash., a non-profit corporation, has been studying the St. Monica policy for some time. A few days ago, Father Emmett received word that the Washington hospital had decided to open an interracial school of nursing after the student body there went on record as requesting it.

"An administrator at St. Luke informed me the action was taken to demonstrate that in no way does anyone attached to St. Luke condone racial prejudices," the Phoenix Franciscan reported. "He said he believed that as long as youngsters have that attitude, there is no need to worry too much about intolerance in the future."

The Phoenix hospital, opened as a non-profit, non-sectarian institution in February 1944, is the largest private hospital in the Southwest. Its School of Nursing was opened in October 1944.

Discussing the hospital policy of accepting students of all races and religions, Father Emmett said:

"We try to ignore the racial line during the students' stay here. They just come in here as girls. This policy is based on the American Christian doctrine that all men are created equal and should have equal opportunities."

Hospital Has
Four Negro Girls
Graduate
July 1

July 1948

(Pictures on Page 19)

PHOENIX, Arizona, July 6 — Four Negro girls from widely different parts of the country were among the 21 nurses graduating Thursday, July 1, from St. Monica's Hospital in Phoenix, Arizona, first hospital in the United States to open a school of Nursing with the definite policy of admitting all races.

The students who earned diplomas after three years of study include Mildred Jones of Baton Rouge, La., class vice president; Elizabeth Rose Brown of Detroit, Mich.; Georgia Louise Dickson of New Iberia, La.; and Ida Lee Elkins of Cleveland, O.

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The aim of St. Monica's school, he said, is to provide the best possible nurses' training and experience for young women, who are enrolled on the basis of ability, not ancestry.

The Phoenix hospital, opened as a non-profit, non-sectarian institution in February, 1944, is the largest private hospital in the Southwest.



ATLANTA ORDNANCE BLOOD DONORS — Workers at the U. S. Atlanta Ordnance are doing their bit to aid the Lawson General Hospital, operated by the Veterans Administration, obtain all types of blood. Pictured in this group are (left) Ford, Jr., 16 Jackson St., and (right) Arnold Jarrell of Morrow, Ga. The nurse in the picture is Miss Juanita Price of Morgantown, Ga. *Daily World* 2-4-48

Depot Employees Give Blood To Lawson General "Bank"

By MARION E. JACKSON

Twenty men of varied ages and has been dubbed the "world's interest jumped jauntily from a largest mechanical university," that truck Tuesday morning at Lawson contributed blood would have a General Hospital and walked gaily day off with pay reward, without and carefully into the one of the losing any employment benefits. large units of the Veterans Admin. Yet the sentiment regarding this isistration Facility to aid patients "Shucks, we don't give our blood of the unit with their blood.

There were veterans in this group from World I and unshaved kids who had seen service in World War II, along with ex-war workers who had done their bit to win the last international conflict, milling in the crowd anxious to do their bit. They had heard through Col. Harry L. Campbell, Post Command er, at the Atlanta Ordnance, that

Another worker at the Ordnance

blood was needed and any donor working at the Ordnance, which interest jumped jauntily from a largest mechanical university," that truck Tuesday morning at Lawson contributed blood would have a General Hospital and walked gaily day off with pay reward, without and carefully into the one of the losing any employment benefits. large units of the Veterans Admin. Yet the sentiment regarding this isistration Facility to aid patients "Shucks, we don't give our blood of the unit with their blood.

In the room, we visited Rev. Jim King, Jr., of 188 Hilltop Circle on the table, while blood steadily flowed from his veins. Hovering nearby were L. Early Matthews, 415 Markham, St.; R. Arnold Jarrell, Morrow, Ga., and William M. Ford, Jr., awaited their turn. Mean-

while, Nurse Juanita Prince of

Morgantown, Ga., busied her self reading others for their turn.

GOT MEN TOGETHER

John W. James, 810 McDaniel St., foreman of one of the Motor Vehicle Cleaning and Preserving Units, back in the hall after making his contribution stated, "I got this group of men together. I am glad we can do our bit to help in this effort." *Daily World*

Col. Harry L. Campbell, who heads the Atlanta Ordnance supervises 2500 civilians workers, and hundreds of soldiers. The Ordnance has an annual payroll of \$3,500,000 in this area. \$250,000 worth of supplies are purchased in this area yearly. Every type of automotive army equipment is repaired and completely overhauled.

The Lawson General Hospital is still in need of large quantities of blood. All types can be used. Students, clubs, organizations and individuals who desire to contribute blood will be furnished transportation. *Atlanta, Ga.*

The 20 civilian workers from the Atlanta Ordnance who gave their "continuing extra effort" was blood Tuesday realize that while what the hospital blood bank need the war is over for them, hundred before it became too dependent upon the free Red Cross supplies. He said that the hospital blood bank had to be built up. Too many resident physicians and interns were dependent on the Red Cross blood, he said.

Order Follows New Policy on

Racial Origin

Kansas City, Mo.

WASHINGTON. (AP) — Blood and blood plasma from the Red Cross will no longer be accepted and used by Gallinger Memorial hospital, Rear Adm. F. S. Rossiter, hospital chief of staff, ordered last week.

The order came when the Red Cross announced that it would not reveal the racial origin of blood and plasma requested by the hospital. The District Red Cross Blood center said that it was following its policy of not giving out the source of blood to district institutions. *Fre.*

Private physicians may request the racial origin of the blood, but government hospitals may not. spokesman said. *7-30-48*

Dr. Alvin R. Sweeney, superintendent of Gallinger, said that the racial question had nothing to do with the hospital decision. He reasoned that the hospital wanted to build up its own bank because Red Cross free supplies were "not always available."

On the other hand, Dr. Jacob Weinstein, chief of the hospital's blood bank, said that the hospital bank does segregate supplies by race as well as by types.

He said that "as far as experts

know today" there is no difference between the blood of colored and white persons.

In giving the reason for blood segregation at Gallinger he said:

"Under order of the executive committee of the hospital, issued several years ago and never rescinded, transfusions of white blood to Negro patients or Negro blood to white patients is forbidden." *The Call*

The questionable order read: "To all chief medical officers, residents and interns: Until further notice, no blood obtained from the Red Cross shall be administered to patients in this hospital. And no additional blood shall be obtained from the Red Cross under any circumstances."

"All chief medical officers shall immediately take steps to insure that residents and interns on their services are cognizant of and shall obey these instructions. This will require extra effort... in securing donors to maintain the solvency of the hospital blood bank."

Dr. Sweeney rationalized that the 20 civilian workers from the Atlanta Ordnance who gave their "continuing extra effort" was blood Tuesday realize that while what the hospital blood bank need the war is over for them, hundred before it became too dependent upon the free Red Cross supplies. He said that the hospital blood bank had to be built up. Too many resident physicians and interns were dependent on the Red Cross blood, he said.

He said, "The blood bank we built up over the years, before the Red Cross program, was being threatened. And we want to keep it an ever-increasing level so that in case of a national emergency when perhaps the Red Cross banks will be drained, we will have enough for our needs. We might even become a blood center for civilian use."

Gallinger gets its blood supplies from friends and relatives of patients receiving blood from the bank, Dr. Weinstein said.

Dr. Johnson Takes Blood Center Post

NASHVILLE. Dr. Charles Johnson, president of Fisk University, has accepted an appointment to the overall committee of the Nashville Regional Red Cross blood service center, Maclin Davis, chairman, has announced.

The blood center now being prepared at 937-939 Church Street, is scheduled to open in January. All blood collected and processed by the Red Cross will be provided without cost to needy persons through hospitals in Middle Tennessee and Southern Kentucky.

Blood Minus Race Labels Refused

denmed as unscientific by physicians of both races. Dr. Jacob Weinstein, chief of the Gallinger blood bank, admitted there is no physiological difference between the blood of white and colored persons.

WASHINGTON

Because the American Red Cross failed to identify the plasma in its blood bank according to the race of the donors, its use has been banned at Gallinger Hospital, it was admitted Wednesday afternoon. *Sat. 7-24-48*

Both citizens and doctors were infuriated by the order and planned violent protests. *Sat.*

The action banning the use of the plasma was taken by Rear Admiral P. S. Rossiter (USN, retired chief of staff, it was admitted after earlier emphatic denials).

Bars Further Red Cross Plasma
The admission came as the result of complaints investigated by the AFRO and the NAACP after a copy of the Rossiter order was obtained which read:

"To all chief medical officers, residents and interns. Until further notice, no blood obtained from the Red Cross shall be administered to patients in this hospital. And no additional blood shall be obtained from the Red Cross under any circumstances.

"All chief medical officers shall immediately take steps to insure that residents and interns on their services are cognizant of and shall obey these instructions. This will require extra effort... in securing donor to maintain the solvency of the hospital blood bank."

Report First Denied

A report that a colored patient was denied a blood transfusion at Gallinger Hospital because the blood donated by the American Red Cross was not designated "white or colored" was denied by the hospital superintendent Dr. Alvin R. Sweeney, Wednesday.

This report was brought to the attention of the local branch of the NAACP by the brother of the hospitalized man, whose name was not disclosed to the AFRO.

According to the secretary of the NAACP, William A. Hill, the man applied to the Red Cross for blood for his brother because the family has been blood donors to the organization's blood bank for several years. *Our American*

Refuses to Say More

It later developed that after the man was given the run-around at Gallinger a nurse informed him of the reason to prevent him further embarrassment.

Late Wednesday the AFRO contacted the brother for a statement but he refused to give one, explaining that the hospital may refuse his brother attention because the report had been made to the press.

Order Called "Unscientific"

The order of Rossiter was con-

Gallinger Ban On Red Cross

Blood Lifted Bloodland Act After

Threat on Permitting

Mixed Transfusions

July 24-48
District Health Officer George C. Ruhland yesterday rescinded a controversial order issued by Gallinger Hospital's chief of staff prohibiting the use of blood furnished by the Red Cross for transfusion.

The chief of staff, Rear Admiral P. S. Rossiter, (USN ret.), issued the order on July 16, shortly after the District Red Cross blood center announced that race origin of blood and plasma would not be designated.

Dr. Ruhland's action yesterday came after his office had received a phone call from an unidentified man who threatened to "take him across the river and fill him full of lead" if he dared to allow "mixed blood" transfusions, he reported.

In his order to Dr. Alvin R. Sweeney, superintendent of the municipal hospital, the Health Officer declared "there is no reason known why pooled blood may not be administered to humans." As far as policy is concerned, he added, "this is not properly in the sphere of the authority of the chief of staff." *July 24-48*

Dr. Ruhland later said he was concerned at some of the "erroneous notions" about blood apparently held by some people.

"Giving transfusions is like feeding a patient, through the vascular system," he declared.

He stressed that his order was not to be interpreted so as to neglect efforts to keep up the hospital's own blood bank.

Refuses to Say More

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Order Called "Unscientific"

The order of Rossiter was con-

D. C. In Row Over Blood Plasma Use

Atlanta Daily World
July 16, stated:

WASHINGTON, D. C. (NNPA) — Dr. George C. Ruhland, District of Columbia Health Officer, last Thursday attacked the "unwarranted" executive order forbidding us of Free Red Cross blood supplies in Gallinger Hospital.

The order, issued by the hospital's chief of staff, Rear Admiral P. S. Rossiter, United States Navy, retired, followed refusal of the District of Columbia Red Cross Blood Center to designate race origin of blood and plasma requested by the hospital.

July 25-48
The Health Department was never asked about it," Dr. Ruhland said, "and it was no business of his (Rossiter's) to pass on this, I am going to rescind that order, of course.

Dr. Ruhland claimed that segregation of blood is "unjustified scientifically and unauthorized." Biologically, he added, "it doesn't make one bit of difference."

TO SAVE LIVES

He said he was "more concerned with saving lives," than arguing about segregation of blood supplies. He said that Gallinger "was a pioneer in the establishment of a blood bank and we want that continued."

The health officer revealed that he has discussed the entire matter with Red Cross officials and plans to direct a letter immediately to Gallinger Hospital—"to set right these practices."

Dr. Alvin R. Sweeney, Gallinger superintendent, however, said the primary reason behind the order was to enable Gallinger to build up its own blood bank so the hospital could be independent of Red Cross supplies, "which might not always be available." *July 25-48*

Dr. Jacob Weinstein, chief of Gallinger's blood bank, said the hospital blood bank does segregate its supplies according to race of the donor as well as blood types. He admitted that "as far as blood experts know today" there is no physiological difference in the blood of colored and white people.

"Under order of the executive committee of the hospital, issued several years ago and never rescinded," said Dr. Weinstein, "transfusions of white blood to Negro patients or Negro blood to white patients is forbidden. There's a legal question involved," he added in explanation of the order.

JULY 16 ORDER

Admiral Rossiter's order, issued on

He explained that all blood collected and processed by the Red Cross will be furnished without cost through hospitals to anyone who needs it. In addition to Nashville and Davidson County, the service will embrace 32 counties of Middle Tennessee and Southern Kentucky.

Native of Bristol, Virginia, and an overseas veteran of World War I, Dr. Johnson joined Fisk in 1928 as head of the Department of Social Sciences, and in 1946 he was elected to his present post. He is a graduate of Virginia Union University and the University of Chicago, and holds honorary degrees from Howard, Columbia and Harvard Universities.

"To all chief medical officers, residents and internes; Until further notice, no blood obtained from the Red Cross shall be administered to patients in this hospital. And no additional blood shall be obtained from the Red Cross under any circumstances.

"All chief medical officers shall immediately take steps to insure that residents and internes on their services are cognizant of and shall obey these instructions. This will require extra effort... in securing donors to maintain the solvency of the hospital blood bank."

A spokesman for the District Red Cross Blood Center explained that the center was following "policy" in refusing to identify race origin of blood supplied Gallinger Hospital, a District institution. The "policy," spokesman said, provides that the center will identify race origin on request of private physicians but withholds such information on blood to be supplied Government hospitals.

Blood Bank Rejects Negro Donor

By Joan Hudson Jones
Daily Worker

The Sharpe & Dohme blood bank, 326 E. 49 St., advertises for blood donors, but when a Negro showed up there they refused to take him.

An official of the commercial blood bank admitted this and also that the bank maintains a blood segregation policy and a quota system when it does use Negro donors.

Aubert Williams, a homeless man told *Daily Worker* he answered a Sharpe-Dohme ad.

"I talked with several white persons, but the nurse took them and told me to step aside and wait," he said. Finally, Williams declared, the nurse told him: "We're not taking any more Negro donors at present." *Daily Worker*

The *Daily Worker* first called and then visited the blood bank director, a Miss Hansen. On the telephone she readily admitted, "Yes, we separate the blood. We are a commercial bank and we have to satisfy our customers."

But when she was asked what difference there was between Negro and white blood, she became ill-

Questioned about their newspaper again about the bank's segregation policies. "We reserve the right to be selective," she said when pushed for an answer. *Daily Worker*

19d 1948

D. C. (Freedmen's Hospital)

Freedmen's Hospital

1948 The World Memphis

Short Of Material

WASHINGTON, D. C.—(NNPA)— Freedmen's Hospital, the clinical facility for teaching medical students of Howard University, is no longer receiving sufficient material with which to train medical students, Charles E. Burbridge, superintendent of Freedmen's recently revealed before the House District of Columbia appropriations subcommittee. *Fri. 5-28-48*

The indigent patient load has dropped from 33½ per cent of the total load to about 13 or 14 per cent, Mr. Burbridge said.

Mr. Burbridge pointed out that approximately 50 per cent of all medical and technical personnel trained in the United States in the past eighty years have had training at Freedmen's.

"In that respect, it is contributing medical education to a large number of Negroes who, if this institution did not exist, probably would not get it", he said.

Pointing out that Meharry Medical College is in very dire financial straits, Mr. Burbridge asserted that Freedmen's might have to "bear the brunt of medical education for the Negro population."

ADMITTANCE NOTED

Representative Walt Horan, of Washington, subcommittee chairman differed with Burbridge, who admitted that white universities are admitting colored students in increasingly large numbers.

Mr. Horan said he had been disturbed by an article which appeared in the Saturday Evening Post, written by Henry and Katherine Pringle, and did not think it made any contribution to the settlement of the "race problem whatever".

In the state of Washington, Mr. Horan said, "we rejoice when the Negro goes to college and he is not excluded from our institutions. I have sat in too many classes with Negro friends of mine who were very good students. We do not exclude them. But the article would have indicated that that was a common practice throughout the United States" *The World*

NO ISOLATED CASE

Representative John E. Fogarty, Democrat, of Rhode Island, said he thought exclusion of colored students from so-called white universities was the practice until the last year or two when the Supreme Court handed down a couple of favorable decisions. He added that the case involving the admission of Lois Si-

puel to the University of Oklahoma was not "an isolated case".

Agreeing with Mr. Fogarty, Mr. Burbridge said the integration of colored students into white medical schools was only recent.

Freedmen's Hospital has approximately 70,000 clinic visits a year to its thirty-three organized clinics, about 30,000 emergency cases, and about 10,000 patients a year admitted to its in-service. *Fri. 5-25-48*

D. C. (Negroes in)

NAACP HAILS COLOR LINE BREAK
IN GALLINGER HOSPITAL

2/19/48

~~Rankin Protests
the Color Line
Negro Doctors
In D. C. Hospital~~

Washington, Feb. 23 (AP) — Representative Rankin (D., Miss.) protested today against new regulations admitting Negro doctors to practice at Gallinger Hospital in the District of Columbia.

He told the House:

"When this attempt is made thus to humiliate the white doctors and the white patients who are bound to patronize Gallinger Hospital, it is about time that members of Congress and the President got off of this cheap scheme of playing politics in order to get a few votes in Harlem and in certain other portions of New York City."

Gallinger is owned and operated by the District. 2-24-48

~~Wisconsin Solon
Daily World
Answers Rankin~~

Atlanta, Ga. — WASHINGTON — (ANP) — A Democratic congressman from Mississippi, John E. Rankin was recently charged by a Republican congressman from Wisconsin with making inflammatory statements to stir up race prejudice. Fri. 3-5-48

The charge made on the house floor Thursday by Rep. Frank B. Keefer brought Mr. Rankin to his feet, with a demand that Keefer's words be stricken from the record. Speaker of the House Joseph W. Martin Jr., however, ruled out Rankin's demand.

The Wisconsin congressman said he could not let the statement made earlier in the week by Rankin, re—that the slightest suggestions had regarding the admittance of Negroes never been made that colored physicians would be put out at Gallinger to treat white patients. 3-5-48

Mr. Rankin declared that the CONTRASTING STATEMENT situation out at Gallinger hospital is Congressman Keefer's statement, stirring up resentment. This statement was made in reference to the suggestion made by Federal Security Administrator Oscar R. Ewing order issued to put Negro doctors in the hospital and give them the last Saturday to representatives of Washington's three medical schools. Mr. Ewing introduced the suggestion that Gallinger be staffed equally by interns from George Washington, Georgetown and Howard universities, and that they be assigned to patients on a rotative basis without regard to race. Atlanta, Ga.

SCHEME CLAIMED — "It is about time that members of congress and the President got off this cheap scheme of playing politics in order to get a few votes in Harlem and in certain other portions of New York City," stormed Mr. Rankin. Atlanta, Ga.

He then pledged himself to protest this move with all his strength

New York, N.Y., Feb. 17—Walter White, executive secretary of the NAACP, today sent a telegram of congratulation to Oscar Ewing, Administrator of the Federal Security Administration, on his success in opening Gallinger Hospital in Washington, D.C., to Negro internes. Mr. White's telegram read:

"The National Association for the Advancement of Colored People sends you its heartiest congratulations and thanks on breaking down the color bar at Gallinger Hospital. This decisive step in abolishing the color line in the nation's capital points the way towards greater opportunity for medical education and care and removing the blot of discrimination which embarrasses us at home and abroad."

objected to receiving medical service from a colored physician, would they not have any choice in the matter?

The FS administrator replied that Negro patients at Gallinger now have no choice as to whom they must be assigned to receive treatment. They might object being treated by white internes, but they have no choice in the matter.

D. OF C. . .

Negro Internes Get Break

SEGREGATION in the capital of the World's Greatest Democracy is beginning to be wiped out. 1948

Latest example is an agreement in principle to allow graduates of Howard University, a Negro college situated in the District of Columbia, to become internes and/or residents at Gallinger Hospital.

Gallinger is a general hospital. In the past, it has barred Negro internes and residents, who are now admitted only to Freedmen's hospital in D.C.

The agreement was reached among Oscar E. Ewing, Federal Security Administrator, Howard and the District Commissioners. Specific details were to be worked out,

with the first Negro doctors receiving their posts next fall, when the new batch of internes and residents takes over.

Ewing revealed that Georgetown and George Washington universities have agreed to give up their exclusive arrangement to supply internes to Gallinger. Georgetown recently opened a new hospital which has announced it will have a policy of no discrimination against potential patients. The

discussions have been under way for a long time, to admit Negro internes to Gallinger, which is the only hospital in the city where Negro doctors may receive half of the output of new Negro doctors in this country are trained at Howard school of medicine.

CIO presented Georgetown with \$50,000 to outfit the F. D. R. Memorial Children's Ward.

There are now some 37 internships and 25 residencies at Gallinger. The number of Negroes admitted will be determined when the details are worked out. Seventy percent of the patients at Gallinger are Negroes.

Under the agreement, Howard professors will treat patients at Gallinger and take their students with them on their rounds.

Howard University now trains about half of the Nation's annual output of new Negro doctors. Ewing said the district commissioners were "most sympathetic on the Gallinger proposal. The opening of the hospital's facilities to Negro doctors has long been the aim of Negro and other liberal organizations."

On Gallinger Hospital Staff



OSCAR R. EWING



The Rev. Merrell Booker, left, first member of his race to be appointed an assistant supervisor on the staff at Gallinger Hospital, chats with the Rev. Herbert Hillebrand, chief chaplain. The Rev. Mr. Booker is chaplain at Freedmen's Hospital and a member of the Washington Federation of Churches staff. He is training at Gallinger under the program of the Council of Clinical Training and is the first colored person ever certified by the council.

At present, Freedmen is the only hospital in the city where Negro doctors may receive half of the output of new Negro doctors in this country are trained at Howard school of medicine.

WASHINGTO, D.C. — (ANP) — An agreement has finally been reached between the Howard University and the district commissioners, whereby graduates from the Howard Medical School serve as internes and residents at Gallinger Hospital.

WASHINGTO, D.C. — (ANP) — An agreement has finally been reached between the Howard University and the district commissioners, whereby graduates from the Howard Medical School serve as internes and residents at Gallinger Hospital.

Gallinger Plan for Howard U. Put Into Effect

Noted
A contract covering admission of Howard University Medical School personnel to training at Gallinger Hospital was signed yesterday at a meeting of the District Commissioners.

The document was signed by Dr. McLean Johnson, Howard University president, and the Rev. Lawrence C. Gorman, S.J., president of Georgetown University. Later, Dr. Cloyd Heck Marvin, president of George Washington University, signed the agreement. Both Georgetown and GWU already are training medical students at the city operated institution.

The contract formalizes a preliminary agreement of last spring under which the Negro medical personnel at Howard will be integrated in the present training program at Gallinger.

At present, instructors from the Howard staff are permitted to bring students to the hospital for observation and preliminary training. Later students will be admitted as internes, and faculty members as attending physicians.

A group of five seniors, including four men and one woman, began studying pediatrics cases at Gallinger on Monday under the direction of Dr. Roland B. Scott, chief of pediatrics at Howard.

Dr. Alvin R. Sweeney, Gallinger superintendent, said the new arrangement "seems to be working fine." Dr. Scott said the Gallinger staff has been "highly cooperative and cordial" and the work has been going very, very well.

Gallinger Hospital Will Admit Colored Internes

Noted
SPECIAL TO JOURNAL AND GUIDE

WASHINGTON, D. C.—Gallinger Hospital of the District of Columbia agreed on Feb. 16 to admit colored medical students for resident internship along with white doctors abolishing the traditional rule of catering only to an "all-white staff." It is the first hospital south of the Mason-Dixon line to take such action.

The agreement was made as a result of efforts of Federal Security Administrator Oscar R. Ewing. Mr. Ewing consulted with District of Columbia officials, heads of George Washington and Georgetown Universities, the two white medical schools here, and Howard University medical school officials.

Under the agreement graduate students from all three institutions will share the facilities and residence space at Gallinger. Until today the only training facilities available to medical students from Howard were at the Negro Freedman's Hospital, although 70 per cent of all Washington patients are colored.

13 ADMIT NEGROES

Out of 6,000 white hospitals in the nation only twelve have allowed Negro interns in residence. Gallinger becomes the thirteenth. Through this action the medical faculty of Howard hopes to double its output of Negro doctors.

The decision of Gallinger Hospital will have far-reaching effects on the training and increase of colored doctors. The lack of facilities and opportunities for internship work has seriously affected the program of health improvement for colored citizens throughout the nation.

1948 1948

D. C. (Negroes in)

Medical Bias Breached in Washington

PPM, Jan. 2-17-48
The first big breach in the Jim

Crow policy of the Nation's Capital **13th of**
since the President's Committee on **6000**

Civil Rights severely condemned "This makes Gallinger's the 13th
it was opened yesterday when Fed- of the 6000-odd non-Negro hos-
eral Security Administrator Oscar pitals in the U. S. A. to admit Negro
R. Ewing announced that Gallinger doctors. I'm proud to have played
Hospital would finally be opened a part in this significant advance
to Negro doctors. *1/18/48*

Gallinger's, the big general hos- Ewing also said Negro interns
pital operated by the District of and residents would be permitted
Columbia, has heretofore barred at St. Elizabeth's, Government
local Negro doctors from visiting Hospital for the Mentally Ill. This
their patients on its wards, although large Federal institution is under
70 per cent of its ward beds are direct supervision of the Federal
occupied by Negroes. The hospital Security Agency. *New York, N.Y.*
has refused to accept Negroes for

residencies or internships. *2-17-48*

**First
In South** *2-17-48*

The new policy, to be put into effect in the Fall, represents the first time that a non-Negro hospital south of the Mason's and Dixon line will be opened to Negro doctors. It will put an end to a vicious cycle which has prevented the Federal-operated Howard University Medical School (which is nearly all-Negro) from doubling its admission of students. *2-17-48*

More than 1200 Negro students applied for admission to Howard Medical School last year; only 70 could be accepted. The school authorities could have taken 140, but for the fact that clinical facilities to permit Negro medical students in Washington to observe actual hospital cases were restricted to the all-Negro Freedman's Hospital. The opening-up of Gallinger's makes it possible to double admissions next Fall. *New York, N.Y.*

Concerned With Problem

"I've been concerned with the problem of discrimination against Negroes in medicine ever since I became Federal Security Administrator," Ewing told me last night.

"I held conferences with the District of Columbia commissioners

and with the officials of George Washington and Georgetown Universities, which have affiliations with Gallinger's. An agreement was amicably arrived at by all parties extending facilities to Howard. Faculty members of Howard Medical School will be able to take their students through Gallinger wards. Negro residents and interns will be accepted there. *2-17-48*

"This makes Gallinger's the 13th of the 6000-odd non-Negro hospitals in the U. S. A. to admit Negro doctors. I'm proud to have played a part in this significant advance toward democratic rights in American medicine." *PPM*

Ewing also said Negro interns and residents would be permitted at St. Elizabeth's, Government Hospital for the Mentally Ill. This large Federal institution is under direct supervision of the Federal Security Agency. *New York, N.Y.*

The Federal Security Administrator, long a champion of democratic rights for minority groups, deserves high commendation for this significant breach in Washington's Jim Crow tradition. *2-17-48*

-ALBERT DEUTSCH

19d 1948

Dental Clinic

Birmingham Opens Six Dental Clinics

The Courier Sat 8/1-48
Pittsburgh, Pa.

BIRMINGHAM. The Jefferson County Department of Health is promoting a county-wide program of dental health education and six dental clinics here.

Attractive, Birmingham-born 25-year-old Dr. Eugenia L. Mobley is supervisor of the Negro Dental Health Program for Jefferson County. She heads a staff of five and is the first Negro dentist to head this program.

STAFF MEMBERS

Staff members include Dr. Bernard Jefferson, 27, of Portsmouth, Ohio, a dental internee of Meharry Medical College, Nashville; Miss Louise Pharris, 21, a dental assistant and senior at Alabama A. and M. College, and Miss Anita Davis, 26, of Little Rock, Ark., hygienist and senior in dentistry at Meharry.

The position of dental technician is unfilled at present.

Clinics are operated are the TB Sanitorium, Bessemer, 220 Arlington Avenue South; the O'moor School Eastern Health Center, Eight North Fifty-ninth Street; Western Health Center, 725 Nineteenth Street, Ensley, and Slossfield, where the work is headquartered.

Miami Hospital May Close Because Of Financial Chaos

MIAMI, Fla. (ANP) — The financial chaos which has threatened to close the doors of Provident Hospital, located at Fort Lauderdale, is no nearer a solution at present than it was several weeks ago when Dr. Von D. Mizell, medical director, informed the board members that unless a more adequate sum was advanced for the maintenance of the hospital, the institution would have to shut down. *7-10-48*

A special committee was recently appointed by whites to make an overall survey of the hospital's needs and to give study to the facilities required for the hospitalization of its Negro patients. *world.*

Most interested in the study are the council of representatives of the medical profession, hospital boards, community chest, and city and county governmental units. *Memphis*

ADDRESSES GROUP

Addressing the group and pleading for immediate financial aid was Dr. Mizell who said that the hospital could not "continue operating under the present setup." He noted that the appropriations received from the city and county and collections of fees from patients, were not sufficient to cover operation expenses. *7-10-48*

A lack of finance said Dr. Mizell, has already resulted in the limiting of hospital operations, as well as a curtailed staff. *Memphis, Fla.*

URGES CONSIDERATION

Faced with the gravity of the situation, the Rev. C. Clarence Stauffer, president of the Council of Social Agencies, urged his white co-workers to "consider the problem and offer some recommendations so that Negro patients may be assured hospitalization."

He further emphasized that "we are sure it is the will of the people to offer some plan whether it is the consideration of other facilities, or the setting up of a better financial plan in continuing operation of Provident Hospital." *7-11-48*

Fla. Hospital

For Group Is

Going Bankrupt

Memphis, Fla.

FORT LAUDERDALE, Fla. (ANP) — Provident hospital is going bankrupt and will have to close unless somehow is found to meet its \$33,000 a year budget, Dr. Mizell, medical director, announced last week. *7-11-48*

He said that the hospital has a rate of \$225 a month and a \$2,600 deficit for current expenses. The appropriations of \$3,600 a year

and \$2,402 a year from the city will not pay for the charity services of the hospital in the local community. Provident handles all the charity cases. *7-11-48*

MANY APPEALS

Appeals to various church groups and to the state to take over the hospital have been made, Dr. Mizell said. The Methodist Hospital board, the Catholic Hospital board and the Methodist Hospital board of Chicago have all been approached

He said that in the past he had tried several times to get Fort Lauderdale or Broward county to run Provident. *Memphis*

Both Negro and white physicians are allowed use of the hospital for their patients. During the war it operated at a profit, but since then paying patients have decreased steadily. *7-11-48*

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Community Hospital Nurses Granted Raise, Report Shows

2-14-48

notable physical changes.

NORFOLK — Two outstanding observations were made by Superintendent W. T. Mason of Norfolk Community Hospital in his annual report to the board of trustees of the institution in a recent meeting. Those observations include the increase in salaries granted the nurses at the hospital, and the added interest that is being taken in the institution by citizens of the

Norfolk Va

In his report, Mr. Mason pointed out that through careful management, the institution has been able to grant increases in salaries that affect not only the nursing department, but all other departments of the hospital as well.

It was revealed that the salaries paid nurses during 1947 reached a total of \$36,694.59 as compared to a total of \$28,150.64 paid during 1946. The figure represents an expenditure of 51 cents out of every dollar received at the hospital.

DAILY CENSUS CONTRAST

In direct contrast, however, it was pointed out that, with a maximum daily census of 143 patients (the number of beds), the institution only accommodates an average daily census of 71 patients, an increase of five over last year's figure, but still less than 50 per cent of available accommodations.

This discrepancy has provoked need for an increased census, it was revealed.

In order to attain this additional patient turnover, plans were suggested by which the hospital could provoke further patronage by the establishment of an active outpatient clinic department; the institution of a public relations program, and the formation of skillful contacts with physicians whose patients would otherwise patronize other institutions.

AGENT RELATIONS

In expanding on the subject of public relations, the report states: "In most businesses, schools and colleges, city governments and hospitals, etc., the importance of public relations has been recognized to the extent that experts in this field are employed to build good public relations."

The report further pointed out the necessity of association with an institution by the public in general in order that it may realize the needs of the institution.

DONATIONS LISTED

It was revealed that during 1947, donations to the hospital amounted to \$1,629.77 as comparable with \$65 the previous year. This figure does not include, Mr. Mason pointed out, the invaluable service that has been rendered to the institution by citizens who have donated their skill, time and efforts in making

ments. Dr. George E. Peace is in charge of pediatrics.

OTHER STAFF MEMBERS

Dr. A. B. Green, Jr. and Helen Harvey, R. N., are anesthetists. Drs. C. W. Eley, K. K. Wallace, and J. D. Jackson are in the department of roentgenology.

Dr. A. F. Strauss is in charge of the pathological and laboratory departments with Dr. John Selden

FINDINGS FOR FUTURE

1—The matter of increasing room occupancy percent is the most important and pressing matter now at the hospital, expressed his desire to take over the decoration and beautification of the ward in which he was a patient. This project undertaken by Mr. Davis has reached an appreciable conclusion, it was revealed, and in addition, Mr. Davis has solicited over a thousand dollars for the institution, of your association."

2—Losses from uncollectable accounts are being reduced.

3—The food costs are being closely surveyed.

4—The operating and overhead costs are being intelligently considered and supervised and with exception of salaries of nurses which were increased as a matter of necessity, said expenses, where practical and possible, were reduced during the fiscal year which ended September 30, 1947, and

5—The general books and rec-

ords were in excellent condition and had been neatly and intelligently kept.

OFFICERS OF BOARD

Officers of the board of trustees of the hospital include, the Rev. R. H. Bowling, president; Dr. S. F. Coppage, first vice president; Mrs. Buena K. Berry, second vice president; the Rev. R. B. Martin, secretary; Mrs. Margaret L.

Numerous other groups have taken interest in special designated rooms of the hospital, it was pointed out, and have created homelike atmospheres in these rooms by painting them in soft pastel shades and adding matching blinds and curtains, to impart to the patient a genuine restful air.

Members of the board are, B. H. Alston, S. H. Bell, Mrs. B. K. Berry, Rev. Mr. Bowling, Mrs. W. P. Collette, Dr. Coppage, Samuel Davis, Attorney J. E. Diggs, W. L. Douglas, H. F. Fonvielle, the Rev. J. J. Freeman, J. O. Gilliam, and the Rev. C. E. Griffin.

Also, Mrs. B. A. Hoskins, Mrs. Aleah King, Mrs. M. L. Lofton, Rev. Mr. Martin, Frank L. Merritt, J. J. Parker, Mrs. Gertrude Perry, Mrs. Osceola Shields, J. Simmons, Mrs. Edna L. Tice, Mrs. H. Washington, Morrell Watkins, and Mrs. Lula P. Foster, honorary member.

STAFF MEMBERS

Members of the hospital staff for 1948 include, in the surgery department: Drs. E. R. Archer, A. C. Fentress, F. W. James, Sr., G. T. Alston, J. T. Givens, S. R. Wilson, Jr., H. R. Boffman, J. E. Washington, J. H. Boyd, J. A. Jackson, S. C. James and J. J. Quarles. Dr. J. Q. A. Webb is chief of surgery.

In the medical department are, Drs. John Selden Jr., A. H. Buck, J. L. Green, W. E. Partee, J. L. Sapp, J. T. Sydnor, D. D. Cornick, and F. R. Trigg, association on

chest. Dr. G. Hamilton Francis is chief of medicine.

In obstetrics and gynecology are, Drs. E. D. Burke, U. S. G. Jones and E. G. Mitchell, assistant. Dr. C. R. S. Collins is in charge.

Drs. F. W. James and E. W. Murray are in the ophthalmological and

oto-rhinolaryngological department.

Dr. J. C. Jackson is in charge of the dental department.

Dr. J. C. Jackson is in charge of the dental department.

General



Mel Koenning

RACHEL STARR, J. HENRY HARDEMAN & YOUNG FRIEND
She inherited a hobby.

Better Mousetrap

When Dr. Martin Bernfield died in San Antonio two years ago, his office nurse, Rachel Starr, found herself with \$44,000, the savings of 27 years, and nothing to do. But she had an idea. Bernfield had made a professional hobby of treating San Antonio's Negroes, and Mrs. Starr remembered his receipt of large, whatever he couldn't get a patient into one of the two-dozen hospital beds available for the city's 25,000 Negroes. Why not, she thought, build and run a hospital for Negroes? As she put it to herself, it was the proverbial better mousetrap waiting to be built.

Mrs. Starr, who had nursed in the rough & tough East Texas oilfields, had never been one "to mess around with church-going." Just the same, she thought that Negro churches might be interested in her idea, so she made the rounds. At the 15th she struck oil. The Rev. J. Henry Hardeaman's Corinth Baptist Church was about to move from San Antonio's East Side to a new site. Mrs. Starr persuaded Hardeaman that the \$39,000 building fund should be used to turn the old church into a hospital instead. She put up her own \$44,000 for equipment.

Last week, Good Samaritan Hospital was formally opened; already, twelve of its 70 beds were in use. In the basement were quarters for Mrs. Starr, laboratories, X-ray and fluoroscope rooms; on the first and second floors, six wards and four private rooms (maximum rate, \$7 a day); two operating rooms.

The new hospital had raised some oppo-

been forbidden by executive order of the hospital's chief of staff. Rear Admiral P. S. Rossiter (USN Ret.), it was learned yesterday.

The order, it was reported, closely followed refusal of the District Red Cross Blood Center to designate race origin of blood and plasma requested by the hospital.

Dr. Alvin R. Sweeney, Gallinger superintendent, however, said the primary reason behind the order was to enable Gallinger to build up its own blood bank so the hospital could be independent of Red Cross supplies "which might not always be available."

Segregation Admitted

Dr. Jacob Weinstein, chief of Gallinger's blood bank, said the hospital blood bank does segregate its supplies according to race of the donor as well as by blood types. He admitted that "as far as blood experts know today" there is no physiological difference in the blood of Negroes and whites.

"Under order of the executive committee of the hospital, issued several years ago and never rescinded," said Dr. Weinstein, "transfusions of white blood to Negro patients or Negro blood to white patients is forbidden. There's a legal question involved," he added in explanation of the order.

Admiral Rossiter's order, issued on July 16, stated:

"To all chief medical officers, residents and interns: Until further notice, no blood obtained from the Red Cross shall be administered to patients in this hospital. And no additional blood shall be obtained from the Red Cross under any circumstances."

sition. Ninety members of Corinth Baptist got out; they objected to the diversion of their \$39,000 building fund (the congregation now worships in a private house), objected to the pastor's leasing the old building to Mrs. Starr for 20 years at a sum so low he refuses to name it.

Some didn't like the fact that Mrs. Starr continued the local custom of demanding down payments from patients (except in emergency cases), and she has received some threatening letters. Says she: "I can't afford to run a charity hospital . . . If I started supporting the indigent Negroes of this town, it wouldn't be long before someone would have to support me."

For the moment (because of a funds dispute affecting San Antonio's big Robert B. Green Hospital), the opening of Mrs. Starr's Good Samaritan meant that the city's Negroes have proportionately more bed space than is available to white San Antonians.

Gallinger**Rejects Blood
Of Red Cross**

*Hospital Denies Race
Origin Is Involved;*

Seeks Own Bank

Use of free Red Cross blood supplies in Gallinger Hospital has

Achievement Chapter 39 To Purchase Incubator For St. Louis Hospital

Pittsburgh, Pa.

ST. LOUIS, Mo.—Chapter 39 of the National Achievement Clubs, Inc., sponsors each year a program that is both entertaining and educational to the citizens of St. Louis. This year the chapter plans to purchase an incubator which will be presented to the People's Hospital of this city.

In order that funds may be raised to purchase the incubator, the Chapter plans to enlist the aid of local clubs and organizations, in sponsoring a "Miss Achievement" contest.

CONTEST TO TERMINATE

The contest will terminate Friday, Dec. 3, at the Castle Ballroom, when the group of debutantes will be presented and at which time Miss Achievement will be crowned. The organization sponsoring the winner will also receive a financial award.

The list of qualifications are as follows: Contestants must be between the ages of 18-22 with at least two years of college training. She must be a member of some church, with good moral character and active in the community life.

Any civic, social or religious group wishing to sponsor a contestant must send the young lady's name, and the above list of qualifications to Mrs. Ora Townsend, president of the Chapter.

When the incubator is presented, those organizations contributing to the project in any financial way, will have their name listed as contributors upon the presentation.

OFFICERS

Other officers besides Mrs. Townsend are Mesdames Bertha Rhodes, first vice president; Ruth Bond, second vice president; Ursula Coleman, recording secretary; Lena Baker, financial secretary; Vivian Green, corresponding secretary; Bessie King, treasurer, and Elaine Robnett, reporter.

\$17,000 Raised For Inter-Group Hospital In Los Angeles

LOS ANGELES (AP)—More than \$17,000 was contributed as crowds jammed the site of the proposed interracial West View hospital last week. The event was the groundbreaking ceremony.

Local religious and civic leaders as well as movie celebrities were on hand at the special program. West View is seeking to raise a fund of \$500,000 to open a fine class non-profit hospital here.

Rankin Makes Claim

He Knew Was False

The Union, Cincinnati, Ohio.

WASHINGTON.—In the discussion January 19 on the floor of the House to establish a hospital for Veterans at the birthplace of Booker T. Washington, Congressman John Rankin, supporting the question, said:

"Recently there was provided an all-Negro Veterans hospital for Mississippi, at Mound Bayou, a Negro town, the land for which was contributed by Hon. Joseph Davis, a brother of Jefferson Davis, shortly after the War between the States—(the Rebellion)."

Not only did Joseph Davis not contribute the land on which Mound Bayou was founded, but he never heard of Mound Bayou. He had no land to contribute, his own plantations in Warren county having been purchased by Isaiah T. Montgomery, founder of Mound Bayou, who had lost the Davis lands and when invited by James Hill, the greatest colored Mississippian, to plant a colony at Mound Bayou, was running a small store on Military Road in Vicksburg.

FOUNDERS OF MOUND BAYOU

Joseph Davis had no more to do with Mound Bayou than the Itawamba Yellow Jacket (Rankin himself). The three men who backed Montgomery and Mound Bayou were Collis B. Huntington, Stuyvesant Fish and James Hill.

The organization that developed Mound Bayou is the Illinois Central Railroad, of which Montgomery was Land Agent. After the "War Between the States" Montgomery went broke being a benefactor of the Davises, Joseph and Jefferson.

Negro Doctors Admitted To Brackenridge Staff

AUSTIN—Tuesday night in a regular staff meeting at the Brackenridge Hospital the issue of admitting Negro Doctors was brought up. Before the meeting had ended, they voted unanimously to admit the Negro Doctors to the Courtesy Staff and grant them use of the Out-Patient Clinic. The local Negro Medical Society, headed by Dr. B. E. Conner, has been working on the problem of entrance into the Hospital and the full use of its facilities in the Out-Patient Clinic for nine years as a major objective. The three doctors admitted were Dr. Conner, Dr. Washington, and Dr. Hallaway.

According to the laws of the staff of Brackenridge Hospital the courtesy described on page 3, Section 4, states: The Courtesy Medical staff shall consist of those members of the medical profession, eligible as herein provided for medical staff membership, who wish to attend private patients in the hospital, but who do not wish to become members of the active medical

interest shown over recent months in the Brackenridge hospital and its administration as a public supported institution the citizens may reasonably expect better service in the future.

Negro on Staff of Boston Hospital

NEW HAVEN, Conn.—(AP)—Dr. Peter L. Marshall, the grand medical director of the Elks, has been appointed to the staff of the Massachusetts General Hospital in Boston, according to a recent announcement here.

Almost a year ago, Dr. Marshall was appointed to the Yale hospital staff and became an instructor in dermatology at Yale Medical School.

His appointment to the Boston hospital staff marks the first time a Negro doctor has served in the hospital since it was established in 1811.

Meharry Hospital Offers Facilities to 4 States

The plan to offer beds to other States she explained, was made necessary by the recent action of Congress in refusing to give Congressional consent to the compact on its investment in the hospital and maintain regional schools.

Under this compact, Meharry would have been taken over by the Southern States as their first regional institution for colored students.

NASHVILLE, Tenn. (NNPA)—Beds in Hubbard Hospital will be offered for rent to four Southern States for use by colored indigent patients after July 1. Meharry Medical College announced May 24.

Dr. Murray C. Brown, medical director of the Hospital, said 126 beds will be offered for rent to Georgia, Florida, South Carolina and Alabama, and that \$400 will be asked for the reservation of one bed and care of one patient for a year.

Meharry announced earlier that the hospital will be closed July 1 unless additional funds are found for its operation. Dr. Brown said the college is losing \$382,000 a year.

\$30,000 Gift To Hospital For Group

Memphis, Tenn.

HOT SPRINGS, Ark. (AP)—A gift of \$30,000 for a hospital for Negroes was presented to the hospital commission of the National Baptist Convention Inc., here Friday by white Baptist groups. The gift, in the form of a check, was given to Revs. R. C. Wood and C. C. Brandon chairman and secretary respectively of the commission, at a ceremony in the Woodmen Union building.

The money represented a contribution of \$20,000 from the Southern Baptist convention, \$10,000 from the Arkansas Baptist convention and \$500 from local churches. It was presented by Rev. Clyde Hart, pastor of Central Baptist church. It was presented by Rev. Clyde Hart, pastor of Central Baptist church and executive board member of the state Baptist convention, who helped raise the money.

The hospital will be in the Woodmen of Union building. After conversion, it will have a bathhouse and nurses training school. The building was sold to the Baptists by the Reconstruction Finance Corporation for \$175,000 but is valued at \$750,000.

Rev. Hart revealed that the hospital will be a \$1,000,000 institution when fully equipped. There will be 150 to 175 beds, 11 thermal water tubs, a drug store and an auditorium seating 1,200.

WASHINGTON — Representative Frank B. Keefe (R. Wis.) has charged yesterday Representative John E. Rankin (D., Miss.) with stirring up racial prejudice following his protest of a plan which would permit Negro medics to practice at Gallinger Hospital.

Keefe took issue with a statement made by Rankin that the people of Washington "are today threatened with a situation out at Gallinger that is likely to bring race trouble."

Insults Negroes, Jews

Taking his fight to the House floor, the Dixie rebel shouted "I submit that when this attempt is made that to humiliate the white doctors and the white patients who are bound to patronize Gallinger hospital, it is about time members of Congress and the President get off this scheme of playing politics in order to get a few votes in Harlem and in other portions of New York City."

Rankin's venom-filled disserta-

No Colored Internes In Connecticut Hospitals

HARTFORD, Conn. — (NNPA) — Although fourteen hospitals in Connecticut maintain they have no racial or religious restrictions on the appointment of internes, there are no colored internes in hospital in the state, the Connecticut Interracial Commission reported last Thursday.

The commission received information from nineteen colored doctors in the state indicating that only two of them were in Connecticut before beginning medical studies and only one of them had sought an internship in a Connecticut hospital.

Of the nineteen colored doctors in Connecticut, six of them served their internships at Freedmen's Hospital in Washington, three in Harlem Hospital, one at Goldwater Memorial Hospital in New York City, one in Mercy Hospital in Philadelphia, one in Middlesex Hospital in Cambridge, Mass., two in Kansas City General Hospital, one at Barnett Hospital in Huntington, West Virginia, and one in Montreal, Canada.

The survey showed that nine colored doctors have staff appointments at various hospitals, fifteen have courtesy or visiting privileges, two are listed as clinical instructors, twelve are members of medical associations, and none was barred from membership in his local or state medical society.

Say Rankin Stirs Race Trouble Over Hospital

WASHINGTON — Representative Frank B. Keefe (R. Wis.) has charged yesterday Representative John E. Rankin (D., Miss.) with stirring up racial prejudice following his protest of a plan which would permit Negro medics to practice at Gallinger Hospital.

The following proposals are now under study by a joint committee:

1. That Howard assume responsibility for 17 beds in the children's department, 20 in the contagious disease ward and from 10 to 30 in dermatology and syphilology.
2. That positions as department heads be given without regard to race.
3. That Howard be granted an equal share of the internships.
4. That each medical school sharing in the program name its own resident doctors without regard to race.
5. That patients be allotted to the three medical schools for hos-

pitals.

pital service by a system which would give each an equal number of patients, without regard to race.

Hospital Here Now Accepts Negro Patients

St. Joseph Infirmary Sets a Precedent

Negro patients in limited number now are being accepted at St. Joseph Infirmary, Sister Mary Benigna, superintendent, announced yesterday.

This is the first time Negro patients have been accepted at any Louisville hospital other than Red Cross Hospital, for Negroes, and General Hospital, the City-County institution.

The new policy was requested by Mother Ann Sebastian, Nazareth, Ky., former mother-general of the Order of the Sisters of Charity, Sister Mary Benigna said.

'Glad to Comply.'

"We were glad to comply," Sister Mary Benigna said. "I have always felt that it should be done. It is a simple matter of Christian charity. Our facilities for the present will be limited."

St. Joseph Hospital, Lexington, also staffed by the Sisters of Charity, has been accepting Negro patients for many years. According to the rules of St. Joseph Infirmary here, Negro doctors cannot be admitted to practice at the hospital because are not members of the Jefferson County Medical Society or the American Medical Association.

SS. Mary and Elizabeth Hospital officials said their institution would not be able to accept patients at the present time because of insufficient facilities.

White Hospitals Add Race Medics To Staffs

LOS ANGELES — Abolishing age old discriminatory policies, several accredited hospitals in this city recently added Negro physicians to their staffs.

The elimination of racial barriers by these institutions marked a long and bitter fight by Negro physicians and civic groups for full integration by hospitals boards.

Doctors Lincoln W. Shumate, Welles E. Forde, I. B. English, W. H. Atkinson, Wayne C. Howard, Jarone W. Johnson and W. W. Davis were granted full staff

privileges at Temple hospital; Drs. Jarone W. Johnson and Dr. Thomas Roy Peyton have courtesy

privileges at Queen of Angeles hospital; Dr. John Coleman, Ja-

panese hospital; and Drs. Forde, English and Traylor, Alta Vista

hospital in Pasadena.

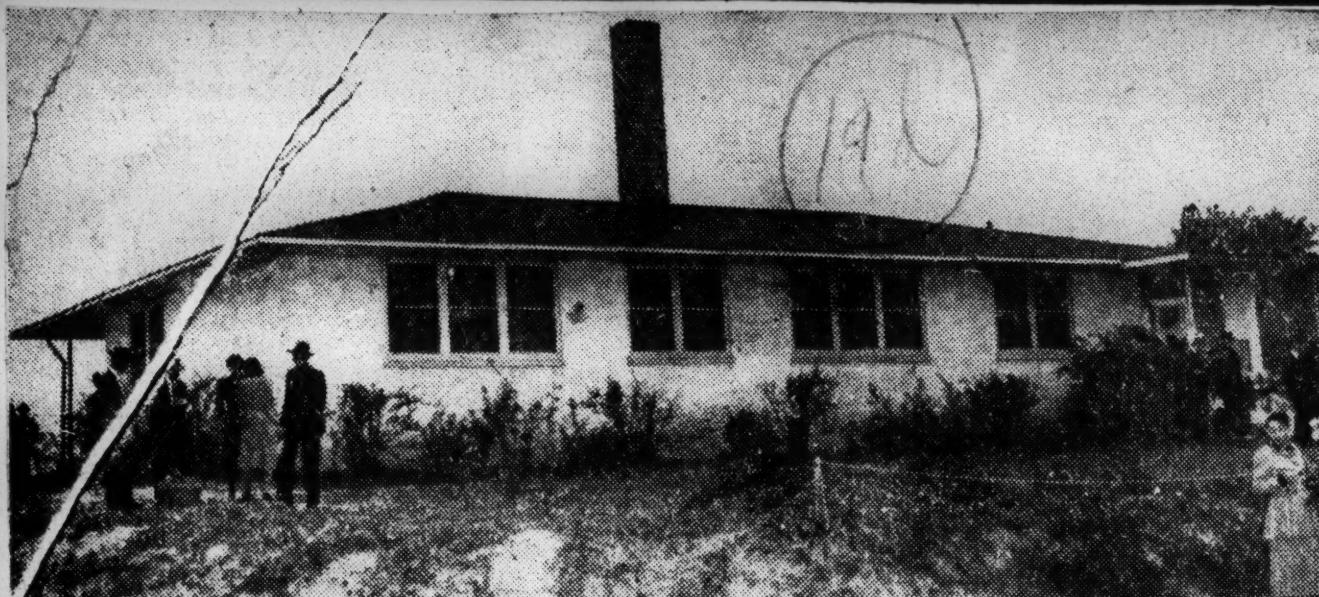
At Los Angeles County General Hospital Drs. Omer W. Barker and Charles Mouton are members of the resident staff. Medical internes are Wallace Morine, Maurice Hickman and Cato Robinson are dental internes.

Planning

Also on the agenda for the convention was the approving of plans for the women's auxiliary campaign to raise \$250,000 during the year for educational work, and the endorsing of the Walter B. Brooks Foundation for payment of salary to a student chaplain at Howard University.

Dr. D. V. Jemison, convention president, presided over the meeting.

Originally constructed by the Woodman Union Lodge, under the leadership of the late John L. Webb at a cost of \$500,000, the building is being offered for sale by the Rural Finance Corporation for \$175,000. RFC took over the prop-



scene shows The Honorable Sam Welsch, Mayor of the City of Marietta, who opened the speech-making with a stimulating address. (Photo by Perrry.)



~~Italians aren't expected to be fooled by the story broadcast last week end to them by the U.S. State Department, telling how Mr. and Mrs. W. J. Edwards above of Oklahoma City, were forced to build a segregated hospital to provide adequate services for their race. Angled by the State Department to show that equal opportunity exists in "democratic" America, the story was beamed to Italy in an effort to affect the recent national elections there. Actually, Mr. Edwards, a prosperous junk dealer, put up most of the \$431,000 for the 105-bed hospital after Mrs. Edwards became seriously ill and found that the only hospital facilities available for her were in an overcrowded jimmie-crow ward in Oklahoma City's white hospital.~~

Our Progress Report for the Past Week

~~A 12-year fight to open the doors of the Lynchburg, Va., city hospital to colored physicians ended in victory with the announcement that staff and hospital privileges has been granted for a trial period through Dec. 31. Credit goes to the persistence of Drs. R. Walter Johnson, Leon Braswell and Robert Wesley. Dr. John F. Burton, New Bern, N.C. has been appointed to Detroit's Parkside Hospital. He has also been awarded a fellowship by the National Cancer Institute of Research for additional study at Bellevue Hospital, NYC.~~

SCENES OF THE HISTORY-MAKING DEDICATION OF COBB COUNTY HOSPITAL—Sunday afternoon, at Marietta, Georgia. At the top is an exterior view of the modern and up-to-date hospital, constructed and equipped at a cost of more than \$42,000. Shown in the center is a formal opening of the Cobb County Hos-

part of the large crowd of white and colored citizens who turned out for the dedicatory program. Shortly after this picture was taken, the audience sang a very appropriate spiritual, "Great Day." The bottom

Friendly Clinic To Expand Its

Memphis Services

Feb. 2-27-48

Friendly Clinic and Hospital, Inc., which started out in 1940 with one bed, plans to add four important new services this year: a blood bank, a complete laboratory with a full-time technician, an incubator section and a deep X-Ray therapy department.

The announcement was made jointly by J. R. Arnold, hospital superintendent, and Dr. S. B. Hickman, hospital medical director, in a report on the hospital's 1947 activities.

MOST CASES SURGICAL

The nonprofit institution for the race of the Midsouth is located at 514 Beale Avenue and has a capacity of 26 beds. Last year 688 patients spent a total of 4869 days at the hospital, according to the report. Nearly two-thirds of the cases handled—the exact figure is four hundred and five, were surgical. Medical cases numbered one hundred and seventy-five and obstetrical one hundred and eight.

Also announced were tentative plans for a surgical seminar for physicians, an annual gathering sponsored by the hospital.

PHYSICIANS TO SPEAK

Among outstanding surgeons slated to speak are: Dr. William Slinger, director of Homer G. Phillips Hospital, St. Louis, Mo., and Dr. Earl Williams, head of the surgical staff at St. Mary's Hospital, of St. Louis.

In charge of the surgical staff here is Dr. H. H. Johnson, who was re-elected Feb. 1st. His new assistant is Dr. T. R. M. Howard, former director of the Teborian Hospital at Mound Bayou, Miss.

Dr. Riley Waller will become house physician in June, succeeding Dr. E. R. Hambrick, it was reported.

Feb. 2-27-48

New Move Seen As Advancement Of Race Health

1948

Weekly Clinics Now

Feb. 6-29-48

Attracting Many

Medics Over State

A new day in interracial medi-estimated \$2,281,6000. Community cooperation looms ahead for leaders are now studying plans to physicians in the Deep South to raise that amount. It is the staff the Emory University Medical School and Grady Memorial have taken the initiative in a program to improve the health of all by extending their program of post-graduate education to Negro physicians.

Advance techniques of postgraduate medicine have been made available to 37 Negro physicians, who attend weekly clinics, according to Dr. R. Hugh Wood, Emory's dean in confirming the establishment of the clinics. Emory also has assumed responsibility for training the staff of the proposed Negro hospital.

All these steps are expressions of the need to improve the health of Atlantans of all races. They will also make Atlanta a more attractive place for capable young Negro medical graduates," according to Dean Wood.

Since the clinics were started eight weeks ago, attendance has averaged about half of the Negro doctors in Atlanta. The Medical Association, composed of Negro School works through the Atlanta physicians. Other Negro doctors come regularly from as far away as Monticello and Marietta. Internes from hospitals in other cities have visited the clinics, with a view to beginning their practice here.

Dr. R. L. Chamberlain, president of the Atlanta Medical Association, states that the group meets each Wednesday and enthusiasm and interests amounts with each session. Dean Wood has assigned responsibility for the clinics to the Department of Medicine. Paul E. Bessom, chairman, and Dr. Robert Grady, Lawson VA and other local supervise the clinics.

Members of the Emory faculty and doctors from the staffs of Emory, Grady, Lawson VA and other local hospitals conduct the seminars. Presenting actual cases from Grady, they lecture on all the specialities. The emphasis is on obstetrics, medicine, surgery and pediatrics.

The new Emory-Grady program is designed to help overcome the three big handicaps Negro doctors face here. As listed in a study published last February by the Atlanta Urban League, they are:

1. The lack of facilities for diagnosis.
2. The lack of sufficient facilities for hospital treatment and care of private patients.
3. The lack of learning opportunities which staff membership in a good hospital affords.

The Urban League also proposed a 248-bed Negro hospital, to cost an

The Health Board survey showed that Georgia has 11 general hospitals for Negroes with a total of 369 beds, and 98 other hospitals (white hospitals and Negro wards) with a total of 1,493 beds for Negroes.

There is, in addition to the general hospital facilities, one hospital for aged Negroes in Atlanta with 54 beds, the Alto Venereal Disease Hospital with 657 beds for Negroes, the Milledgeville State Mental Hospital with 2995 beds for Negroes, Battey Tuberculosis Hospital with 500 beds for Negroes and tuberculosis hospitals at Savannah and Augusta with 35 beds for Negroes.

Among general hospitals for Negroes the locations are as follows: Atlanta, 3; Bainbridge, 2; Savannah, 2; Cordele, Elberton, Rome and Americus, one each.

In the Atlanta metropolitan area there are 523 beds for Negroes.

PROPOSED CENTER

It has been proposed that a new general hospital for Negroes be constructed in the Atlanta area which is very short of requirements. The Atlanta Urban League has collected data, which will be released shortly and which will reveal the real need and steps that have been made to satisfy that need in the Metropolitan area. The Atlanta Medical Society of Negro physicians has been behind an effort to establish an all-Negro staffed medical center costing upwards of \$2,000,000 at Grady Hospital.

According to the State Board of Health, hospital may be constructed with Federal aid when communities put up two-thirds of the required funds, the other one-third to come from Federal funds. Acting Governor Thompson has said he would ask the 1949 Legislature to refund one-third to the local communities.

The Fulton-DeKalb Hospital Authority has not yet fully completed its plans with regards to a proposed Negro medical center at Grady.

The State Health Department announced approval of two more proposed hospital constructions at Carrollton and Greensboro. The proposed programs call for expenditure of \$375,000 and \$340,000 respectively.

Daily Wise And Needy State Atlanta, Ga.

"We believe that men and women of good will should not wait until changes are forced upon them from without, but should themselves take the initiative and work for justice and fairplay for all elements of our population." These are the striking statements in the preface of a program of Interracial Cooperation for Virginia, and published by the Virginia Council of Churches. We are indebted to The Southern Regional Council for reproducing this statement in its May issue of The New South, devoted to Hospital Construction and Health in the Southern States.

For our immediate purpose we use it to commend the wisdom of the authorities at Emory University and Grady Memorial hospital in the attempt to bring medical services within the reach of larger numbers of our Negro people in Atlanta and in Georgia, by thus opening the doors to Negro physicians to conduct their internship. The fact that the step is long past due is no good reason why these authorities should not be highly commended for so doing.

The authorities, in announcing the plans for training Negro physicians, acknowledged the work of the Atlanta Urban League in calling attention to the hospital and health needs of Atlanta Negro population, which may be assumed to be even better than those over the State. The League finds: "That the health of Atlanta's Negro population compares unfavorably with that of the white population of the city; that existing hospital facilities available to Negroes are inadequate; that there are few Negro doctors, dentists and nurses to meet the community's needs and that opportunities for the professional growth of Negro physicians are non-existent, which limitations deter Negro physicians who might otherwise choose to practice in Atlanta, thus making it difficult to increase the number upon whom the majority of the Negro population depends for medical care."

We are glad to know that steps are beginning to be made for the improvement of the training facilities for Negro physicians and nurses as well as for the improvement of the health status of the low income Negro masses. For in the words of Jane P. Simpson, writing in the May, 1948 issue of the New South, "The people who live in the neediest areas not only have the least adequate health services but also can least afford to pay for them."

7-1-48

Hospital Need Great In State

Med. 1-5-48 Med. 1-5-48

that there are at present 6,103 hospital beds in the Empire State for the minority, and that facilities for Negroes are very short. The total need is based on the ratio of 4 1/2 beds per 1,000 population.

John Ransom, hospital construction director for the Board, disclosed

Negroes to Staff Atlanta Hospital

Star-Ledger
Sat 10-30-48

Colored Internes Will Receive Training at
New Medical Center in Gate City

ATLANTA—Atlanta Negroes are going to get a \$1,500,000 private hospital to be constructed at Grady Hospital, in the near future. Negroes in the area, promises to push the long-awaited dream.

Announcement that a contract had been let to an architect was made last week by Hughes Spalding, chairman of the Fulton-DeKalb Hospital Authority. The firm of Abreu and Robeson was given the go-signal to draw up plans and specifications for a one hundred-bed structure to be located on a lot at the corner of Butler and Armstrong Streets, across the street from the proposed location of a new \$20,000,000 Grady General Hospital.

Plans call for the Negro hospital to be of construction in keeping with the proposed new \$20,000,000 unit which will be twenty stories high. The hospital will be for exclusive use of patients able to pay for services.

Atlanta citizens and hospital authorities long have called for a new hospital for Negroes who are ineligible for constantly overcrowded Grady, but have no other place to go for medical care.

Both Hospital Authority Chairman Spalding and Grady Superintendent Frank Wilson have de-

plored conditions at Grady, where Negro women have been forced to be discharged two hours after delivery of babies in many instances.

Financing for the new hospital is expected from the Federal Government, the State and private Atlanta sources which have pledged donations to Chairman Spalding, who is connected with the Coca-Cola Company.

TO HAVE RACE INTERNES

Negro internes will receive training and Negro doctors practice at the proposed hospital unit. Medical care will be directed by chiefs of services at Grady, who are usually professors of the Medical School of Emory University.

Representatives of the Atlanta Urban League and the Negro professional and business community have held conferences with Grady and Emory officials, as well as with those of the two-county hospital authority pointing toward making the dream a reality.

Hospital Authority Spalding, long aware of the acute need for medical and clinical services for Ne-

Cobb County Hospital In Formal Opening Today

Star-Ledger
Sun 10-31-48

The formal opening of the Cobb County Hospital at 3 p. m., today, at Marietta, will point the way to another avenue for achieving better medical services in the South. The new hospital, constructed and equipped at a cost of more than \$41,000 is a direct result of the cooperative efforts of the white and colored residents of the county.

Among the speakers slated to appear on the opening program are, The Honorable Sam Weisch, Mayor of the City of Marietta; George McMillan, County Commissioner, Dr. W. H. Benson, Dr. Mayes Gober, Dr. Asa Johnson, of Marietta; and John Wesley Dobbs, of Atlanta. Rev. L. R. Edwards, chairman will preside.

The idea of building a hospital to provide adequate medical care for the colored citizens of Cobb County originated in the Men's Ideal Club, of Marietta at a meeting held on February 18, 1948.

A drive was launched to raise the funds and the white citizens of Cobb County joined the colored citizens in this worthwhile project. A site was selected out on Montgomery Street and the campaign moved off to an enthusiastic start.

Spearheading the drive were Rev. L. R. Edwards, chairman; S. D. Drew, vice-chairman; Prof. M. J. Woods, secretary; D. H. Holmes, treasurer; Bealer Myers, and Howard Gregg.

In addition to a laboratory, X-ray room, operating room, and maternity ward, private, and semi-private wards, the hospital will have seven additional beds for men and five for women patients.

thing is more convincing that whites and Negroes of the South can and will work together if both groups determine to be fair and honest with each other.

A popular movement for health, planning for health, working together for health, is in the last analysis the only way in which we raise the standards of health in our communities and for the nation. That is precisely what citizens of Marietta did last week, when they worked and built such a great and vital Institution for the maintenance of health of the Negro citizens of Marietta and Cobb county.

We take this opportunity to extend our congratulations to the Negro people of Marietta and Cobb county upon their achievements. With equal strength we commend the white citizens, who in more ways than this, have shown and demonstrated over the years, their goodwill and enlightened self interest in matters which concern their Negro neighbors.

Pleas For Doctors, Internes Made To Grady Municipal

NEW YORK. — (NNPA) — Dr. Paul R. Cornely, medical Hospital of Freedmens' Hospital in Washington, has recommended that Grady Hospital, a municipally owned hospital of Atlanta, Georgia, open its doors to colored interns and appoint competent colored physicians to its staff.

Dr. Cornely made his recommendation after a study of a report on other southern cities have been "able to move along the line of direction indicated in his program, and added

According to Dr. Cornely, Atlanta that he saw no reason Atlanta has not attempted to provide hospital and clinical facilities in proportion to the needs of its colored population.

6-11-48
The report also showed that there are no local provisions for the hospitalization of either white or colored tuberculous patients or for the psychiatric treatment of mental patients.

Declaring that the report showed that colored professional personnel in Atlanta is definitely handicapped and "stultified" because the city offers them no facilities to keep him abreast of medical services, Dr. Cornely also recommended that some of the large private hospitals in the community open their doors to colored private patients and colored physicians, and efforts should be made to have colored people represented in the Atlanta City Health Department.

Development of a coordinated program of health education, which will affect the majority of colored citizens in the community, and the employment of competent colored health educators to participate in the development of such a program, also were recommended.

Dr. Cornely said the report was "objectively and strongly presented" but he scored the study for its failure to map an effective plan to rem-

physician to each 1,000 to 1,500 persons;

2. That there is only one Negro dentist to each 12,722 persons, while the standard is one dentist to every 2,000 persons;

3. That there are only 98 Negro registered nurses available for all the public health, institutional, educational and other community needs.

6-11-48
Disclosure of Dr. Cornely's recommendations was made by the National Urban League.

The Urban League's report specifically:

1. That although the Negro's health has improved greatly over the past 10 year period in Atlanta the health of the Negro compares unfavorably with that of the white population;

2. That existing hospital facilities available to Negroes are inadequate, showing that there are 2.6 general hospital beds per 1,000 Negro population while the standard of the United States Public Health Service is 4.5 beds per 1,000 population;

3. That a minimum of 248 additional general beds are needed for Atlanta Negroes, because existing hospital facilities are distributed inequitably among racial and economic groups;

4. That of the 1,850 general hospital beds available in the Atlanta area only 391, or 21.7 per cent may be used by Negroes.

ACUTE SHORTAGE
Not only does the League find a shortage of facilities available to Negroes but it likewise points to a frightful shortage of Negro physicians and Nurses. It says:

1. That there is only one Negro physician to each 3,368 persons, while the accepted standard is one

2D ANNIVERSARY OF HOSPITAL HERE

The Constitution
Meharry Grad Runs 55-Bed Clinic

Atlanta, Ga.

Sun. 4-11-48
By KATHERINE BARNWELL

Dr. F. Earl McLendon, who founded the McLendon Medical Clinic at 1370 Sharon St., N. W., just two years ago today, is proud of the progress made by the 55-bed Negro hospital—but more concerned about the "progress yet to be made."

The tall Negro doctor, self-styled "director, surgeon and janitor" by turn, surveyed with approval the antiseptically-clean layout in the hospital's two brick buildings with approval.

"But," he said with a sigh, "there is much still to be done . . . much more equipment is needed."

With an A. B. degree from Morehouse College and an M. D. degree from Nashville's Meharry Medical College, Dr. McLendon came to Atlanta four years ago after 14 years of practice in Athens.

"I began to dream," he said, "of a 500-bed hospital just for Negroes in Atlanta." And he's still dreaming.

"We need one," he declared, "whether it's this one enlarged—or another." 4-11-48

When the McLendon Medical Clinic was opened in April, 1946, it had a bed capacity of 25. Its growth was so rapid that after six months of operation, it had expanded to an overall bed capacity of 40. Today, it has beds for 55—but 64 patients can be accommodated "in a pinch."

McLendon Clinic is operated on a nonprofit basis, Dr. McLendon said, explaining that all surplus is "put back into the hospital for improvements."

Profits are "ridiculously low," he added, and pointed out that the per diem rate ranges from four to six dollars—whereas, he said, most hospitals estimate a patient's per diem cost at \$8.34.

Both white and Negro doctors place their patients in the hospital. Some 40 or 50 doctors have treated patients at the Clinic since it opened. There are now 13 staff nurses, compared with four in the beginning.

Present facilities include 10 wards, seven private rooms, two four equipped fracture beds, an operating room, one delivery room, one electro-cardiograph and metabolism room, one X-ray room, nine infirmary units, four cribs, one incubator and two dietaries. 4-11-48

But there is a long list, too, of facilities needed.

Dr. McLendon explained a mobile X-ray unit was "badly needed." He said the hospital has only one stretcher—and should have two. It has only one wheelchair—and needs six or eight.



Constitution Staff Photo—Carl Dixo

HOSPITAL'S "SUPERMAN"—That's what they call year-old Eddie Tukes, because he's so strong. Nurses at McLendon Medical Clinic, where he's a patient with a club foot, had to take the rollers off his bed to "keep him from rolling it off." Dr. F. Earl McLendon, Director of the Clinic, and Nurse Ernestine Reid visit him.

Funds to help part-pay patients receive surgery, and funds for prenatal and venereal disease outpatients are also on the "needed" list.

The hospital Director is working to obtain a full-time teacher not a reality.

for children hospitalized over a period of months. His Clinic admits crippled children (whose expenses are paid by the State), and many of these are of school age. Projection equipment and portable radios are wanted to give young

19d 1948

Hubbard

"Save Hubbard" Cry Unheeded by Local People Able To Help

Meharry Administration
Not Showing Eager-
ness To Get Aid Now

As in Former Drives

June 11-48
A full week after much publicity regarding the financial crisis that had overtaken Hubbard Hospital had appeared in the newspapers, little had been done by colored citizens to raise any part of the \$170,000 it is stated will be needed to keep the hospital from closing on July 1.

That there is considerable money that could be raised among colored citizens of Nashville and surrounding towns if a drive were launched for the hospital, is generally conceded. But apparently no such invitation to get into the money-raising effort has come from Meharry Medical College's officials or trustees as heretofore has been extended in the very few times they have ever sought to get local support for the institution.

The fact is being pointed out that nearly all of Meharry's troubles come from a lack of local community interest in paying for services the hospital has rendered, these being services that the community, itself, never should have saddled off on the generous Northern foundations that built and endowed Meharry. 6-11-48

While Meharry has been maintained primarily for the education of colored persons in medicine, dentistry and other professions, it nevertheless has afforded quite a number of jobs for Nashvillians, white and colored, and the vast funds from the foundations have notably increased the money that has been in circulation here. It is well known that the "momentary value" of Meharry, as much as the education of colored doctors, lately has aroused interest in saving the college and the hospital. But as aforesaid, colored citizens have not taken steps to get into the money-raising drive.

The promptness with which one of the Northern foundations came forward with a big financial offer to help Meharry, provided the community would raise its share of money, is suggesting to many that the chances are more than even that the sources from which Meharry in the past has gotten its funds are still available for keep-

ing the institution the great national medical school its founders intended it to be. The proper community interest, put forth by the city, county governments and by individual citizens could save Meharry permanently from the clutches of politicians and exploiters, it is widely believed.

Hubbard Must

Not Close

The news was bitter, it was not sweet—

Like the Lily and the Rose
I sat as took my seat
Hubbard Hospital will close

I wonder will this tragedy come?
Will Hubbard Hospital die?
It will be a pity to see—

The time is drawing nigh

But it should concern us all,
Especially Tennessee,
Hubbard Hospital must not fall
No sir— No sir-ree.

Will Hubbard Hospital close its doors
And shut out the sick?
Let's make it bloom—just like the rose
Let Hubbard Hospital stick

And when night has descended
Although be scared and bent
Upon God's sand s'll always stand
As a living monument.

By William Ursery
1410 Sigler St.
5-0898

Provident Hospital Seeks \$500,000

CHICAGO, Ill.—(AP)—Provident Hospital, located in the heart of the city's colored population, has launched a drive for \$500,000 for the extension and modernization of its facilities.

Provident treats about 90 per cent of Chicago's Negro patients and helps train many of the nation's Negro surgeons and nurses. Albert F. Hunt, vice president of Swift and Company, is general chairman of the fund campaign.

Hunt pointed out that Provident operates under an annual deficit of \$100,000 because of the large number of clinical and emergency patients. In 1947, the hospital treated 8,500 clinical patients in 50,000 visits, and had 10,000 emergency patients who made 12,000 visits. Bed occupancy averaged 80 per cent with 7,127 patients.

Approximately \$200,000 is needed for new operating rooms, X-ray equipment, laboratories, and other necessary improvements, Hunt said.



EXECUTIVE DIRECTOR of Provident Hospital, Clyde Reynolds, class of '29 graduate Morehouse college, represented Chicago Morehouse alumni at the college's 81st anniversary celebration recently in Atlanta.

Red Cross Hospital, Past and Present

The admirable article of April 25 on the Red Cross Hospital deserves the support of all citizens interested in hospital welfare. The article, however, is indicative only of the present and future without reference to those generous supporters who laid the permanent and essential foundations of whatever the hospital may become. Mrs. J. B. Speed, Mrs. Andrew Cowan, Mrs. Charles T. Ballard, Miss Lucy Belknap and their succeeding generation gave such guidance and guardianship as few institutions enjoy. The superintendent for 34 years, Miss Mary E. Merritt (the first registered nurse in the State of Kentucky) should receive perpetual inclusion in hospital history and be so recognized and recorded.

Louisville 4-28-48 CAROLYN APPERSON LEECH

Red Cross Hospital

Louisville Hospital

Lower's Racial Bars

Wed 19-10-48
Griggs Fund Ruling Upset On Appeal

Court Says Donor Intended to Set Up Ward for Negroes

Frankfort, Ky., Nov. 9 (AP)—The Court of Appeals ruled to day the L. E. Griggs' fund for a Negro hospital can be used only for a ward at Mary Chiles Hos- pital at Mount Sterling.

The hospital, in a white residential section, declined to erect an addition, half of which would be for Negro patients and half for whites, as directed in Griggs' will.

Montgomery Circuit Judge John J. Winn, Jr., decided that the trustee of the will and a group of Mount Sterling Negroes who filed the test suit, could use the money to erect a Negro hospital in another part of town. Judge Winn said the main purpose was to provide medical treatment for Negroes.

Must Return To Estate.

The Court of Appeals declared, however, that Griggs, who died in 1944, specified the fund must be used to care for Negro patients on the hospital grounds, "and not otherwise." In view of that, said the State's highest court, the trust fund must return to Griggs' estate.

The value of the gift was not stated. It consisted of Griggs' property at Main and Maysville Streets in Mount Sterling and his interest in the Trimble Theatre Building there. He provided that the proposed annex at Mary Chiles Hospital cost at least \$12,500 and provide beds for at least 10 Negroes. Half the income from the property was set aside for

treatment of them and half for general hospital purposes.

Louisville Hospital

Lower's Racial Bars

LOUISVILLE, KY (AP)—St. Joseph Infirmary officials announced on Sept. 1 that colored patients were being admitted there for the first time, disclosing that four such patients have been admitted at a time for about six weeks and cared for without segregation.

The change in racial policy was requested by Mother Ann Segastian, until recently mother-general of the Order of the Sisters of Charity. She said St. Joseph Infirmary in Lexington, also staffed by Sisters of Charity, has been accepting all patients for many years.

STATE HOSPITALS MUST ACCEPT NEGROES

Frankfort, Ky.—In a letter to Dr. A. M. Lyon, secretary of the State Tuberculosis Sanatoria Commission, Assistant Attorney General W. B. Holifield said Monday that Negroes must be accepted at each of the six State tuberculosis hospitals. The statutes specify equal facilities at each hospital for patients of each race in the hospital district.

19d 1948

Maryland (Negroes in)

**Marylander Gets
Hospital Post**

SALISBURY, Md.—(NNPA)—Dr. G. Herbert Semby, who had been practicing for the past 17 years, was appointed to the Staff of Peninsula General Hospital, it was announced last Friday by Dr. J. Dayton, superintendent of the hospital and acting secretary of the Board of Directors. *Sun 4-4-48*

This marks the first time in the history of the Eastern Shore that a colored physician has been so honored, and Dr. Semby's long record of service to the community justifies his selection. *Sun 4-4-48*

The new staff member, a native of Baltimore and Howard University graduate, is a specialist in internal medicine. He holds membership in the Del Mar Va Medical Association, and Chi Delta Mu Fraternity. He has been in charge of the baby clinic in Salisbury for the past nine years.

Peninsula General Hospital has been advancing the cause of the Negro for some years and recently appointed Miss Helen Dennis as a laboratory technician. Dr. Albert W. Kitts is chief of staff.

'Just For People,' Defender Nerve Center Motto

By LILLIAN SCOTT

NEW YORK--The nation's only free mental clinic--not for "white or Negro" but "just for people," the La Fargue Clinic of Harlem, has so many cases now the whole basement that waiting lists have with a dozen cubicles developed. Besides recognition from the man and treatment. in the street, the clinic has also been called in recently for scientific testimony by the New York City courts.

All of which is a far cry from the days two and a half years ago when the clinic was just a dream of Dr. Frederic Wertham, its founder, and a group of like minded citizens who saw the dire need for psychiatric facilities in Harlem, indeed in all New York.

Defender EARLY SUPPORTERS

Dr. Wertham's earliest supporters were Earl Brown, Richard Wright, Mrs. Marion Hernandez and Rev. Shelton Hale Bishop, of St. Philip's Episcopal church, who gave the clinic its first and only quarters. Housed in the beginning in two small basement rooms of the church, the clinic has now overflowed to

"The La Fargue 'clinic"

quirks in a vacuum. An attempt is made to co-ordinate all the social skills and relate the individual's mental condition to his problems, his awareness of race etc.

In his slight accent (he was born in Bavaria) and intense tones, Dr. Wertham says of Harlem's present mental state, "It is difficult to evaluate now, but there is growing insecurity. It's much greater now than it was during the war and just after it." He added insistently, "But Harlem is New York--the more I see it--the more I don't know it--but it is all one with the entire city." *Det. 1-31-48*

STUDYING COMIC BOOK EFFECT

At present, the clinic among other things is studying the effect of comic books on youngsters. The clinic and its inter-racial staff of psychiatric social workers, case workers, pediatricians, etc. are not content to analyse a patient's mental

A Saga of Songs

"Sing us a song, preacher," the jailer said.

The Negro man hunched over on the bunk opened his mouth wide and the music started coming. The words were unintelligible, but words didn't matter. It was a song, any how, a song of majesty and melancholy.

The little knot of visitors crowded closer. Music filled the little cell and overflowed into the hall pen. The words were unintelligible, but words didn't matter. It was a song, any how, a song of majesty and melancholy.

"What's the name of that song?" a visitor asked. The jailer shook his head. "Some sacred song—I forgot what." his sentence.

Another visitor peering into the dim little cell pointed mutely to the cardboard fan the singer held in his hand. The words were printed there and suddenly they were clearly point out, "the doctors take longer than the hangman." discernible in the vocal refrain:

"A. C. Whi-ite furn-i-toor companee . . . new and used refrig-er-ators . . . good bargains on Edge-a-wooda aven-OOOH. . . ."

Ain't Did No Wrong, Says Mental Case

Downstairs in the woman's quarters a tiny gray-haired Negro woman stood beside her barred door weeping silently. Tears coursed down her wrinkled, wizened face and she wiped them off with a wisp of white handkerchief. Her blue and white cotton dress was spotless. An old-fashioned brooch held her collar in place. Her shoes and stockings were neat. Except for the agony of silent weeping, her figure was tidy and composed.

The matron drew near and the old woman stretched out a dark, wrinkled hand in supplication.

"Mist'is, mist'is! Please ma'am, lemme outa heah! I'sestew, green beans, rice pudding and muffins; turnip greens, standin' heah in my 80th year and the po'lices ain't never squash and onions. muffins; roast beef, dressing, gravy, coffee and biscuits; wieners, gravy, syrup, biscuits and coffee; salmon croquets, gravy, syrup, coffee and biscuits. Dinner—macaroni and cheese, field peas, fresh corn, muffins; lamb

ma'am, I ain't

ere wrong?"

"Sit and deeply. "Sit

down on your bunk, aunt

test. We know you haven't done anything

The way for you willtune in on any conversation in any cell in the jail.

be opened up. Somehow, soemdy it's going to be fixed so

we won't have to put sick folks in jail."

relay radio programs to them or play records. When the radio system was installed a year ago there were pessimists who predicted prisoners would tear out the loud-speakers, but instead they responded with gratitude for the music and

functions of the agency, briefly put, are as follows: 1.—To find out what is wrong with Junior who has become the despair either of his teacher or his parents. 2.—To help restore Junior to normal childhood, unless his case is hopeless. 3.—In the case of Negro children, to attempt to save them from neurotic attitudes which sociologists ascribe to racial frustrations.

Complaints About Youngsters

Junior is perhaps a youngster who is reported as too aggressive, constantly picking fights with other pupils at school. He may be a boy who "cuts up" in class, learning little while distracting the attention of other pupils. Or a teacher may feel that he is too dull or too stubborn to absorb

to other people. He may be a boy and a gang complex, or the child represents a new problem as a sort of punishment once each week to discuss the nature of the case, and the parents assigned to him are under study. These

family's physician may report that are devised to fit each case after views that his family wanted him to discuss the nature of the case, and the parents assigned to him are under study. These

he suffers from bladder trouble. the nature of a problem has been to be smart and had curtailed his

interests and this year there was a grant of \$10,000 from the National Mental Health Act Fund.

In the case of a child who seems

to be a boy and a fresh challenge. Treatments

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center, every effort is made to make him aware that he is among friends who are seeking to help him. He is consulted in some cases on his own ideas as to possible remedies, and these are usually used to supplement those devised by staff members. During the period of observation a child visits the center three or four times a week for about an hour each day. The same conditions hold true for treatment periods, which are of varying lengths.

A 20 per cent efficiency record was marked up for treatments during the first year of operation. This was considered good, and when reports for the second year indicated that the figure had risen to 72 per cent even the officials were inclined to wonder. Each case was checked again, and, according to Dr. Mamie Phipps Clark, they all stood up.

Dr. Clark and her husband now feel that the center has a useful future and that its possibilities are limitless. They feel that similar agencies rendering personalized service to children are a necessity in communities like Harlem, where children are left to themselves while parents work, and where teachers have all they can do in trying to deal with overcrowded classes.

Integrated Mental Hospital Successful

LAWRENCE, Kan.-(AP)—"Tact, patience and common sense are a large part of the treatment of mental illness," Walter Starnes, aide at Winter General Hospital, Topeka, told a meeting of the Lawrence League for the Practice of Democracy, in the 9th St. Baptist Church, last Thursday night, as he spoke on "Lessons in Mental Health."

The speaker is the 1947 winner of the "aide of the year" award of the National Mental Health Foundation, Philadelphia, for mistreatment of this patient. which honor he had been selected. One Oklahoma patient seemed out of 12,000 applicants.

Although he has had no scientific training, he has been recommended by psychiatrists at the hospital for his valuable work in treating patients. He has charge of a "closed" ward for serious mental disturbances.

No Segregation Policy Works

There is no racial segregation or prejudice shown, at Winter General Hospital, according to Mr. Starnes. Colored doctors, nurses and aides work with their white colleagues and have both colored and white patients.

He described one especially

said. "You may have to taste their food to show no one is trying to poison them, or show them in other ways that they are not thinking right."

"Never laugh at a crazy person," he cautioned. "Never talk about them where they can hear, particularly with the catatonic patient who sits motionless, ignoring everything, but who nevertheless knows what is going on around him."

Physical Therapy Helpful

"Ball games, pitching horseshoes or other gym activities are a great help in quieting combative patients," Mr. Starnes suggested.

Although Winter General often is considered a mental hospital, more than a third of its 1600 beds are for surgery and other types of cases, the speaker explained.

"It is a very good feeling to see a patient well and on his way back home to his people," Mr. Starnes said.

Intelligence Cyclotron Planned To Destroy Global Prejudice

New Knowledge

By RICHARD TOMPKINS LONDON-(AP)—The mental hygienists Monday set themselves the task of building an "intelligence cyclotron"—a sort of brain smasher—to destroy international prejudice.

The idea was put forward at the International Conference on Mental Health by Dr. Frank Fremont-Smith of New York, vice-president of the international committee for mental hygiene. He summed it up this way:

"Just as the physicists, chemists, engineers and mathematicians needed to collaborate in order to build the cyclotron for the release of atomic energy, so must we, the specialists in individual and group behavior, join forces to forge a different kind of cyclotron.

Intelligence Rays

"It would be one that will use the powerful rays of human intelligence to penetrate the tough outer shell of suspicion, prejudice and hostility, and thus release the untapped energies of goodwill and cooperative effort which lie in the heart of man."

Dr. Fremont-Smith said a confused and troubled world is looking to the mental hygienists to mobilize the knowledge of social scientists "to promote mental health and harmonious human relations and thus to provide a basis for enduring peace."

Heretofore, he said, the principles of mental health have not been brought to bear upon the crucial problems of the world. New knowledge of human behavior is available, but without the guidance of social scientists it results in suspicion, prejudice and hostility, he said.

Butler said the mental perplexities in the world could be cleared away by the social scientists if "we have the patience and the scientific skill and the determination to pool our knowledge and resources in a bold frontal attack."

A message from King George VI to the conference said he is confident the hygienists will contribute to "a better understanding of troubled communities and a convalescent world."

Arvid Brodersen, of the social sciences section of the United Nations Education, Scientific and Cultural Organization, promised UNESCO's cooperation in carrying out the conference's recommendations.

the Arnall Building, named for Ellis Arnall when he was Attorney General, and the beautiful maximum security building, where criminally insane prisoners from Tattnall are confined.

But building at Milledgeville is a slow process and, at best, a drop in the vast ocean of the institution's need. A new Negro unit, now under construction, will be finished next Fall but even after it is ready when you can't get doctors."

for occupancy it will accommodate only 450 of the 1,000 now living in a firetrap. That will mean that the woefully inadequate 1882 building will continue to stand, that the old-fashioned "twin buildings," housing 1,500 white women, the Dupre building, housing 750 patients, detached buildings and frame dormitories, housing 470, will continue to constitute dangerous prisons to the ill men and women confined in them.

In addition to the dangerous housing for one-third of the hospital's 9,450 patients, there's the heart-breaking spectre of medical neglect. Dr. Yarbrough, the administrative head of the institution, is forced by the shortage of doctors to leave his office for hours at the time to make ward rounds and give shock treatments. In addition to Dr. Yarbrough and Dr. R. W. Bradford, clinical director, there are 16 other doctors for nearly 10,000 patients—and six of those are past 65 years of age and four are incapacitated, according to the Superintendent's last annual report to Director Ireland.

Milledgeville's acute need of doctors is not merely a reflection of the national need, officials insist, but something more sinister—the fact that the State Hospital for the Insane has long been a political football. There have been instances when a new Governor taking office would fire 300 hospital employees at one swoop.

As a result the 1,100 hospital workers, the majority of whom make less than \$100 a month, engage in frenzied political activity making up for lack of security by a grasp for temporary power.

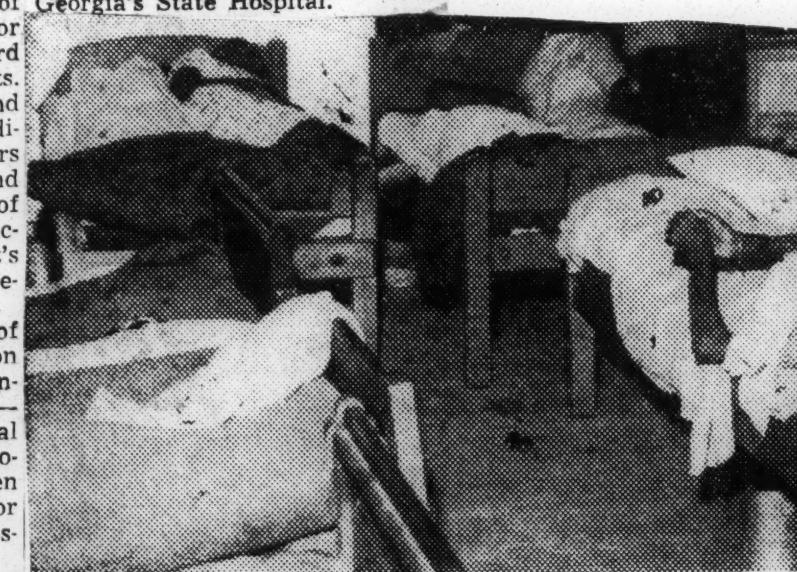
Although there is no record of doctors and superintendents having been fired in a change of administration, nurses and technical workers are constantly menaced by threats of underpaid, often-times unskilled attendants and laborers, and Dr. Yarbrough smilingly admitted that the Superintendent gets his share of warnings, too.

"They come too late now to scare me," Dr. Yarbrough said. "I'm like that old firetrap over there—I came into the world in 1882 and I'm tired. But I am concerned for my patients. They are helpless people whose care should be the first consideration and there is no way of caring for them

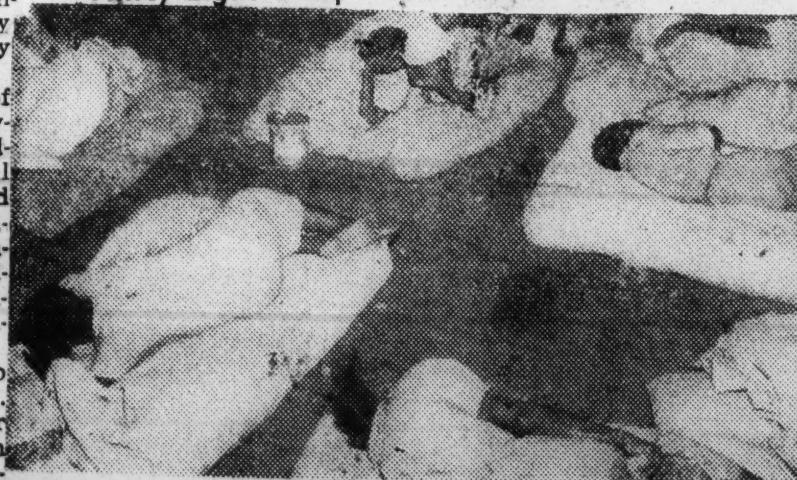
Jan 10-24-78



First Adequate Space for Patient Recreation



Thirty-Eight Sleep Where There's Room for 10



Constitution Staff Photo—Ryan Sander
No Bed for 25 Women Tonight



Bathroom Facilities for 110 Women

PHILADELPHIA MENTAL
HOSPITAL HIRED AIDE

PHILADELPHIA, Jan. 10—Instituting its new policy of hiring needed workers without regard to race, the Philadelphia State Hospital last week added Miss Elsie E. Gordon to its staff as a social worker, the Armstrong Association announced. A graduate of Wilber-

force University, Miss Gordon has worked for the past three years as a social worker with the state department of public assistance.

19d 1948

Mississippi

Hospital Facilities

BILOXI, Miss.—(AP)—A proposed \$1,800,000 hospital for Negroes at Sanatorium was approved this week by the Mississippi commission on hospital care. Chairman J. O. Slaughter announced. The 156 bed hospital will be financed by \$626,000 in federal funds and a legislative grant. The commission also approved a 16 bed \$175,000 unit at Lexington and a \$138,000 unit for LeFlore county.

156-bed Hospital To

Be Built In Biloxi

BILOXI, Miss.—A \$1,800,000, 156-bed hospital for Negroes at Sanatorium was approved by the Mississippi commission on hospital care here last week. Commission Chairman J. O. Slaughter said that the proposed project would be financed by \$626,000 of Federal funds and a legislative grant.

He also revealed that a 16-bed, \$175,000 unit had been approved for Lexington and a \$138,000 health unit for LeFlore county.

In addition to its mixed staff, Mount Morris Park has a mixed board. Serving on the staff in an advisory capacity are Dr. Louis T. Wright, chief of surgery at Harlem Hospital; Dr. Aubre de L. Maynard, associate chief of surgery at Harlem; and Dr. Peter Marshall Murray, co-chief of gynecology and obstetrics at Sydenham.

Harlem Doctors

Pro-American

Buy Hospital

Baltimore 19A

NEW YORK (NNPA) — A corporation representing 94 Harlem physicians has purchased Mt. Morris Hospital, a modern fire-proof seven-story building with a capacity for 54 beds, clinic and other facilities. *Sat. 8-28-48*

The building was purchased for \$54,000 and \$45,000 has been spent to date on renovations. It will operate on an annual budget of \$120,000.

Dedication of the new hospital was held during the National Medical Association convention, but the hospital will not open until Sept. 15. *8-28-48*

It will operate on an interracial basis.

Staff Named

William H. Trayham, now assistant to the superintendent of Harlem Hospital, has been named executive director; and Miss Ellen Ward, former supervisor of nurses at Harlem Hospital, will become superintendent of nurses.

Dr. Cecil Marquez has been elected president of the medical group, with Dr. Robin I. Bennett, vice-president, Dr. Hyacinth Davis, secretary, and Dr. Walter Winter, treasurer.

Other members of the corporation include Dr. Peter M. Murray and Dr. Louis T. Wright. Mrs. Rosa L. Blocker heads a women's auxiliary to the new hospital.

N.Y.'s Municipally-Owned Hospitals Found Democratic in Their Policies

Privately-Owned Institutions Discriminate

Either Against Patients, or Medical Staff

By JAMES HICKS

NEW YORK (NNPA)—A study of hospitals in the New York area are admitted to and treated with need. *Sat. 5-22-48* shows that while colored persons out discrimination in New York's 26 municipally-owned hospitals, privately-owned hospitals here cannot make such a claim.

Colored doctors and nurses occupy staff positions in municipally-owned hospitals and colored patients are hospitalized in them without segregation. Typical of municipally-owned hospitals are the Queensboro General and the Triboro, the latter of which is in Long Island.

Prompt, Courteous Service

Dr. Beatrice Katz, medical supervisor of the Queensboro Hospital, welcomed a scrutiny of the Queensboro wards.

It was found that all patients are admitted in emergency cases without "red tape." The hospital does not question the patient as to whether or not he is able to pay for his medical aid until after the aid has been given.

When a patient arrives at the hospital, he is assigned to whatever bed is available at that time.

Doctors have no difficulty in following their patients into New York, and that since the patients were those sent there by colored doctors are Drs. John E. Lowry, Judge A. Thompson, Sterling Fields and Leroy Barnes.

Internes, Nurses Used

The Queensboro accepts colored internes like all other municipally-owned hospitals; and one, Dr. Albert Beasley, is presently interning there. He is a graduate of New York University's Medical School.

The hospital already employs some colored nurses and says it will be glad to hire more since it is presently understaffed in nurses.

In addition to nurses, doctors and internes, the Queensboro employs colored persons without discrimination as attendants, technicians, social workers, ambulance attendants, cooks, dietitians and nurses' aids.

Triboro Hospital Democratic

The modern Triboro Tuberculosis Hospital is another example of democracy at work. Built so that every room receives sunlight on sunny days, the hospital, ac-

ording to Dr. Alfred Ring, medical superintendent, admits patients only on the basis of medical need. *Sat. 5-22-48*

On its house staff is Dr. Eric O'Neil. Dr. George Cannon is a member of its visiting staff, and next July, Dr. Charles N. Yergan, son of Dr. Max Yergan the publisher, and Dr. Clotilde D. Bowen, who are currently interning at Harlem Hospital, will be added.

Here again, hospital officials stated that they are short of nurses and will add as many qualified colored nurses to their staff as they can find.

Private Hospitals Contrast

In sharp contrast to the open way in which the municipally-owned hospitals invited scrutiny was the tight-lipped evasion of New York's private hospitals.

At Doctors Hospitals, a swank private institution overlooking the East River, officials admitted they had no colored patients, but would not state that colored persons were denied admission to the hospital.

We are genuinely sorry to lose Dr. Friedman but feel we should not prevent his taking advantage of an opportunity which he values highly for family as well as professional reasons." Mr. Baldwin said. "During the year he has been at Sydenham he has so organized and strengthened the administration of the hospital that it is now in excellent shape to carry on."

Referring to the development of Sydenham as the first interracial voluntary hospital in the United States, Dr. Friedman wrote in his letter of resignation: "The faith in democracy and the belief in the Sydenham project, which

he brought me here, have not decreased a single iota. They have, on the contrary, increased immeasurably. For, on every level, the proof of the hospital's democracy has been irrevocably erected, and the possibility of its fulfillment everywhere finally demonstrated. . . . I hope that I have in some small measure contributed to the inevitable success of the institution."

An assistant of the superintendent of the hospital explained that, "all colored people are placed on the pavilion, that's all."

He said the hospital has some colored nurses and doctors and that he knew of three colored men in Cornell Medical College, a part

of the hospital.

The hospital, one of the most modern in New York, was made possible through a grant from Payne Whitney. It hires a number of colored persons as attendants and for other menial tasks.

Dr. Sigmund Friedman Quits As Sydenham's Director; Frank Adair To Be Acting Director



FRANK ADAIR

anything. "It's too bad they're in such critical need of money. I know one of the girls who changed the flowers in the room had to quit while I was there because she couldn't live on her salary. But I know also that they could probably do better financially elsewhere. I guess Sydenham's the kind of hospital they're proud to work in."

Miss Alice Greenstein, 1275 Nelson Ave., The Bronx 1.00
Eva C. Smith, Bedford Hills 2.00
Anonymous 5.00
Ema H. Levy, 282 Cabrini Blvd. 1.00
Doris Steele, 245 New Lots Ave., Brooklyn 1.00
Lillian Schaffer, 709 Essex St., Brooklyn 5.00
Starker, 275 Sullivan Pl., Brooklyn 2.00
Grill, 275 Sullivan Pl., Brooklyn 5.00
Mrs. Frank Garrison, 56 Bennett Ave., The Bronx 25.00
Mr. & Mrs. Murray Hertz, 153 Division Ave., Brooklyn 3.00
Rene K. Davidson, 92-16 White-

Attracted by Interracial Policy, Patient Finds a Friendly Place

By GERALD BLAINE

Mrs. Maud Emanuel, whose first child, Christina Anne, was born at Sydenham Hospital Nov. 7, chose is supporting the institution's contribution to the health of the community, one example of which is told in this article. For that reason it beggars the nurses for just another glimpse of my baby through the they're proud to work in."

Mrs. Emanuel, previously an instructor at Sarah Lawrence College and now married to a magazine staff writer, had heard of Sydenham in arriving, she recalled, "so for another ever since her arrival in New York City in 1945. Its interracial policy had captured her imagination and she resolved to have her baby there if possible. *Sat. 5-22-48* I shared my room with a Mrs. Eta Cueta who came, I think, from the Virgin Islands. We other patients were extremely helpful. I didn't know a thing about preparing formulas or

Everything Lovely

The New York Star believes that Sydenham deserves to continue being a College Instructor

ney Ave., Elmhurst	1.00
Steven M. Kuschwara, 8 Orchard St., Garfield, N. J.	1.00
Samuel Mandel, 25 W. 24th St.	7.50
Leon Singer, 500 Washington Ave., Brooklyn	5.00
The House of the 14th Saint	3.00
Malachi Mulligan, 544 W. 49th St.	1.00
Gertrude M. Prager, 2707 Sedgwick Ave., The Bronx	5.00
Mrs. Martha Shapiro and Edna Skelka, 2191 Creston Ave., The Bronx	2.00

Contributions from Star readers, eager to assure the continuation of Sydenham Hospital—the country's only interracial voluntary hospital—now total \$10,740.97. The goal in the current drive is \$150,000.

Here is the list of the latest contributors:

Theodore U. Berger, 3657 Broadway	\$2.00
Calvin C. Gould, 131 Cumberland Ave., Syracuse	5.00
J. K. Boston, Brockton, Mass.	5.00
Robert Greenstone (Age 6 1/4 yrs.)	
1210 Sherman Ave., The Bronx	1.00
Mrs. M. H. Prager, 3 Stuyvesant Oval	2.00
Alice P. Openhym, 99 Hillcrest Rd., Hartsdale, N. Y.	10.00
V. L. Weiland, 104-12 Atlantic Ave., Ozone Park, L. I.	3.00
Miss Brazzelle Smith, 304 W. Mrs. P. W. Warner, Salisbury, Conn.	3.00
Azaroff Family, 3130 Brighton 6th St., Brooklyn	10.00
Joy Bressner, 67 Christie St.	1.00
Miss E. J. Burton, N.Y.C.	1.00
Louis W. Goland, 1330 E. 36th St., Brooklyn	1.00
Irwin Pollack, 82 E. 95th St., Brooklyn	1.00
Anonymous	1.00
Anonymous	2.00
Anonymous	5.00
B. J. Small, 65 Leonard St.	25.00
Mrs. Clara Rubin, 255 Hart St., Brooklyn	2.00
Mr. & Mrs. L. W. Portens, 35-44 95th St., Jackson Heights	2.00
Mr. & Mrs. Albert Gordon, 1674 Varnum Place, N. E., Washington, D. C.	5.00
Mr. & Mrs. Ernest Parkee, 2786 Jerome Ave., The Bronx	1.00
Max Raskin, 1839 81st St., Brooklyn	5.00
Eunice G. Borda, 191 E. 17th St., Brooklyn	2.00
M. Weissman, 643 E. 6th St.	5.00
Michael Klein, 423 Beach 66th St., Arverne, L. I.	1.00
J. Guttenplan, 1846 E. 31st St., Brooklyn	1.00
Goldstein, 319 Jerome St., Brooklyn	2.00
Anonymous	2.00
Mrs. M. Sargent, 1426 81st St., Brooklyn	1.00

United for a Worthy Cause



World Heavyweight Champion Joe Louis and his No. 1 challenger, Jersey Joe Walcott, hold 10-year-old Dolores Grant as the trio chatted at reception given for Louis at Essex House last week. The Joes came inwardly when he was told he had not won.

Walcott said he will leave the type of fight he should fight up to his handlers. He said he still feels that the advice they gave him to box Louis and stay away from him in the last two rounds was the best advice handlers could give.

Jersey Joe reiterated his statement that he felt he had won the last fight. Asked if Louis had hurt him, he said the only hurt he received came inwardly when he was told he had not won.

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Open Training Camps

He reminded reporters of the fate of Bob Pastor. "Pastor went in and lost," Walcott said. "I stayed out the last two rounds and lost too."

Louis said on his arrival here from Europe last Monday that he will definitely quit the ring after his fight with Walcott, but that he will do some "shopping around" before making up his mind to enter politics.

Louis said he doesn't anticipate any trouble from Walcott. He said he hadn't given a thought to Jersey Joe while being abroad.

Louis said he hasn't made up his mind as to what he will do when he retires. He said he might enter the insurance business.

Louis, Walcott Help Sydenham Hospital

NEW YORK (NNPA)—Joe Louis and Jersey Joe Walcott met last Tuesday afternoon over tea and crumpets at a reception given in honor of Louis at the Essex House. The reception was held in behalf of Sydenham Hospital, to which the proceeds went. Max Kase, sports writer, was the chairman of the committee which sponsored it.

Louis is co-chairman with Eddie Cantor of the Sydenham Fellowship campaign, which is seeking to raise an emergency fund of \$500,000 to establish the hospital on a sound financial footing.

Walcott, whom Louis faces in a heavyweight title match June 23, was a featured guest.

Both champion and challenger appeared in fine form. Joe posed the "Sy" as in "side." with his arms around Walcott and Louis said he called it "Sidenham" as "Sidenham," pronouncing it with a few witty wise cracks at them" because it is easier to say it Jersey Joe's expense. Not to be that way. Walcott said the pro-outdone, Walcott showered his announcement didn't matter as long as the hospital was aided.

New York (Sydenham)

With Louis and Walcott sitting next to each other, flanked by Barney Ross, retired undefeated lightweight champion; Bob Olin, former light-heavyweight champion, and Beau Jack, for the benefit of sound pictures Walcott was asked to interview Louis on his trip abroad.

Opening the interview, Walcott said, "Well, Joe, I guess you're glad to be back in the United States."

"Yeah!" Joe replied, "I'm glad to get back so I can get ready for you." The audience howled.

"Did you do any fighting over there?" Walcott asked. "Ninety-four rounds," Joe replied.

"Ninety-four rounds," Walcott said, "Looks like you've been stealing a march on me and getting ready ahead of time. You're not trying to sneak up on me, are you?"

"Naw, Joe, I'll warn you," drawled Louis.

Wishes Walcott Luck

"Well I'm going into training Thursday and try to get ready myself," Walcott said.

"I wish you the best of luck," Louis said.

"The same to you, Joe," Walcott said as the interview ended.

Walcott told reporters afterwards that he now weighs about 199 and hopes to get down to about 194 pounds for the fight. He expressed confidence that he will win. He says he has just as much at stake this time as he did the last time they met.

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Mrs. Maud Emanuel chose to have her baby born at Sydenham Hospital because she believes in interracial medical care. "I enjoyed my stay there," she says.

STAR Photo by Morris Gordon

Louis Gives \$5,000

To Hospital Fund

Harlem Doctors

NEW YORK—(ANP)—World Heavyweight Champion Joe Louis contributed \$5,000 to the Sydenham Hospital Fund last week through his manager, John Roxborough. Albert H. Bullwinkel, representing the woolen industry brought in the largest single contribution, reported \$4,000.

A nine-year-old girl, Dolores Grant, has collected \$431 in her drive for the hospital fund. The fund seeks \$500,000.

Harlem Doctors Back Race Plan At Sydenham

Group Also Votes Support

Health Main Concern

The Central Harlem Medical Society, composed of 180 Negro physicians, has voted indorsement of the interracial policy at Sydenham Hospital and of its approaching campaign to make up operating deficits. Dr. Cyril H. Dolly, president of the society, said yesterday. Sydenham Hospital is at Manhattan Avenue and 124th Street.

According to Dr. Dolly, the organization "serves to bring Negro doctors to provide hospital facilities for patients in the community." He said these rumors who had been unable to obtain may have been brought to light by the recent such affiliation either at Sydenham or other hospitals. Without such time the medical fraternity appreciated the importance of Sydenham to the community.

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When integration was adopted at Sydenham, said Dr. Dolly, the Mount Morris Park hospital was fully staffed. He said it was expected that a number of white doctors would resign because of the new policy, but that instead of the other way 'round,' Dr. Dolly. "There integration of Negroes has been rather slow. The concern of the Central Harlem Medical Society is the health of the Negro community."

playwright, and Dr. Mordecai W. and 121st Street. Dr. Dolly, president of Howard University, will speak at a meeting of Negro doctors in the community. Dr. Dolly, president of the Central Harlem Medical Society, is preparing to compete with the recent such affiliation either at Sydenham or other hospitals. Without such time the medical fraternity appreciated the importance of Sydenham to the community.

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PPN New York, 7-21. Wed 4-14-48
Jersey Joe Walcott (left) shakes hands with Brown Bomber Joe Louis as 10-year-old Dolores Grant, a Sydenham patient who raised \$500 for the hospital's fund campaign, and ex-welterweight champ Barney Ross look on.

Photo by John Albert, PM

A Couple of Joes Punch Hard for Sydenham Fund

New York, 7-21. Wed 4-14-48
A couple of guys named Joe, who will try to beat each other back," Louis laughed. "I gotta go to a pulp on June 23d, fought on the same side yesterday to raise funds for Sydenham Hospital.

The two Joes—heavyweight champ Louis and Jersey Joe Walcott, his opponent in their forthcoming fight for the title—

Both men made short speeches joined hands at a reception at the Essex House in behalf of the interracial voluntary hospital in the emergency fund-raising campaign for the interracial hospital. Joe Louis, who returned from an exhibition tour of England two days ago, was first to arrive and was joined shortly after by Walcott who asked:

"You glad to be back, Joe?" "Yeah, I guess I am glad to be back," Louis laughed. "I gotta go in training for you."

Walcott, who lost a hotly disputed decision to the champ in their last fight, shot back:

"You didn't get back too soon



PPN New York, 7-21. Wed 4-14-48
Sydenham Fan Screen star Charles Boyer made his contribution to the Sydenham Hospital emergency drive yesterday in front of the Pierre Hotel. Miss Thelma Porter (Miss Subways) takes the screen lover's donation while Irma Krakower, another Sydenham volunteer worker, stands by.

Photo by John De Biase, PM

Joe Louis Gives \$5,000 To Hospital

NEW YORK—(ANP)— World Heavyweight Champion Joe Louis contributed \$5,000 to the Sydenham hospital fund last week thru his manager, John Roxborough, as

gifts poured in to the fund. Albert H. Bullwinkel, representing the woolen industry, brought in the largest single contribution, \$34,000.

Calumet, J.C. Sun
A nine-year-old girl, Dolores Grant, has collected \$431 in her fund seeks \$500,000.

4-14-48

BUT MONEY IS NEEDED

Harlem Hospital Has No Racial Barriers

BY ELEANOR ROOSEVELT

NEW YORK—Recently I spent an evening with a brilliant young woman who has made a tremendous fight to improve racial relations in this country.

Last spring she spent a long time in a hospital here in New York City and she told me that it was one of the most interesting experiences she had ever had.

Here was a hospital on the edge of Harlem—Sydenham Hospital—where racial barriers had been broken down, where there was no discrimination either in the personnel or in the treatment of patients.

5-29-48
THERE ARE Negro and white doctors practicing in Sydenham; there are nurses and laboratory technicians working in complete harmony though they belong to different races.

The interesting thing is that it all runs so smoothly that one accepts it as a perfectly natural situation and ceases to be self-conscious about it.

The hospital is a good hospital, but it needs improvements and it needs to be on a more secure financial basis.

They are having a drive at present for \$500,000, but only about half of that sum has been raised.

5-29-48
WHEN WORD was sent out that the hospital might have to close for lack of funds a man offered to lend his life savings of \$25,000, provided the money would be returned when the institution could do so.

And a little 9-year-old crippled girl, Delores Grant, who had had an operation in the hospital, collected over \$500.

5-29-48
These are stories of individual effort. But the institution, to reach its goal, must raise \$300,000 more. It has no endowments and no cash reserves.

There must be people in other parts of the country who are anxious to see an experiment of this kind succeed.



Harlem Launches Drive for Sydenham Institution

5-24-48
Baltimore, Md.

Chairmanships Set Up, Nation-Wide Drive

for \$7,500,000 to Get Under Way Later

MY DAY

5-24-48
New York hospital tries
racial experiment others
could very well follow

By Eleanor Roosevelt

5-29-48
NEW YORK—Recently I spent an evening with a brilliant young woman who has made a tremendous fight to improve racial relations in this country. Last spring she spent a long time in a hospital here in New York City and she told me that it was one of the most interesting experiences she had ever had.

Here was a hospital on the edge of Harlem—Sydenham Hospital—where racial barriers had been broken down, where there was no discrimination either in the personnel or in the treatment of patients. There are Negro and white doctors practicing in Sydenham; there are nurses and laboratory technicians working in complete harmony though they belong to different races. And the interesting thing is that it all runs so smoothly that one accepts it as a perfectly natural situation and ceases to be self-conscious about it.

5-29-48
THE HOSPITAL is a good one, but it needs improvements and it needs to be on a more secure financial basis. They are having a drive at present for \$500,000, but only about half of that sum has been raised as yet and they cannot feel really secure until they have the full amount. Even more important, people who should be giving their time and thought to methods of improving the institution are obliged to give it to the task of getting money to meet the immediate needs.

One of the interesting little things that occurred when word was sent out that the hospital

might have to close for lack of funds was a telephone call from a man who offered to lend his life savings of \$25,000 provided the money would be returned when the institution could do so. And a little 9-year-old crippled girl, Delores Grant, who had had an operation in the hospital, collected over \$500. These are stories of individual effort. But the institution to reach its goal must raise \$300,000 more, since it has no endowments and no cash reserves.

5-24-48
I write about this because, while it is a New York hospital and should receive support primarily from New Yorkers, there must be people in other parts of the country who are anxious to see an experiment of this kind succeed. Perhaps the knowledge that such an experiment does succeed in one place may spur people to try the same thing in other places.

5-29-48
SOMEONE HAS written me that, in a recent column, I left the impression that only in the South and in Washington was racial discrimination practiced. I would not like to have any one think that. I am completely aware that discrimination is practiced to a lesser or greater degree all over our country. Therefore, it is the concern of all good people everywhere to back efforts of all kinds which create better understanding and prove that racial co-operation is possible.

Sydenham Hospital Needs Physicians

5-29-48
NEW YORK—Dr. Sigmund L. Friedman who is resigning as director of Sydenham Hospital stated last week that he is having difficulty finding Negroes for appointment as resident physicians at the hospital.

5-29-48
Dr. Friedman said that orthopedic surgery, pathology, anesthesia, pediatrics and x-ray divisions are in great need of residencies. In pointing out how badly the medical profession is in need of Negro specialists he cited a recent survey by Dr. W. Montague Cobb, professor of anatomy at Howard University Medical School.

5-29-48
The survey revealed that there are less than 100 Negro specialists in the United States compared with 20,000 whites; in branches like anesthesia there are no Negro specialists; nearly all Negro specialists covered by the survey are practicing in Washington, New York, Chicago, St. Louis, Nashville, Tenn.

5-29-48
Dr. Friedman will take Sydenham March 15 to assume administration of Mt. Sinai Hospital, Cleveland.

SYDENHAM SEEKS AID TO BAR CLOSING

My Sister
Hospital in Harlem Declared
to Need \$50,000 Before
Midnight Wednesday

Officials of Sydenham Hospital, interracial institution in Harlem, said yesterday that it would be forced to close at midnight Wednesday unless \$50,000 were raised before that time.

Emergency meetings of board members, staff personnel and no professional employees were held at the hospital, with various groups pledging financial support. The workers volunteered to forego their salaries, if necessary, to keep the institution open.

Some employees went into the streets with collection cans, church groups in Harlem sought donations and individuals came to the hospital with contributions. By the end of the day \$8,000 had been collected.

Dr. Sigmund L. Friedman, retiring executive director, said the hospital owed \$160,000, but expressed confidence that the emergency sum of \$50,000 could be raised.

Other officials said \$450,000 more would be sought to wipe out the deficit and to improve an operating fund for both the hospital and the projected Sydenham Institution, which would serve the Harlem and Manhattanville areas.

"Sydenham Hospital needs immediate help to cover its deficit, keep its doors open for the sick and establish itself on a sound financial footing," said Edwin C. Boas, acting president of the board.

"Sydenham has no endowment and no reserves. The major part of its work is free. If Sydenham Hospital fails, each one of us who believes in the democratic process also has failed."

The city was expected to take over the hospital if it failed. The institution is the only private interracial unit in the municipality.

Officials of the hospital reported that each year it treated 35,000 persons in the out-patient clinics, 36,000 in the emergency rooms and 6,000 in beds. The staff of 250 doctors is supplemented by 400 nonprofessional employees.

By Gerald Cook

The story of Sydenham Hospital's fight for life is the story of the stubborn refusal of Sydenham workers to give up "their" hospital—the only

interracial institution of its kind to him "little by little" formed and the benefits to be derived from performing it are understood.

The hospital, located in Harlem, other job last May to work at has no wealthy endowments and no reserves. Sydenham's 300-odd employees work harder for less pay than they would receive in municipal hospitals. The employees, nurses, dieticians, orderlies, office workers, kitchen workers, laboratory technicians, are enthusiastic about the hospital's pioneer work against Jimcrow in hospitals.

When the board of directors announced Feb. 29 that funds were exhausted and the hospital would be closed the workers, members of Local 444, CIO, United Public

Workers, went into action. The board had announced that unless \$50,000 were raised in three days the hospital would be turned over to the city. A meeting with the city's Board of Estimate was arranged to discuss the proposed transfer.

Mar. 3-1948
PLEDGE \$100 EACH

At an emergency meeting the workers, who two weeks earlier had voted to forego their pay to keep the hospital going, pledged to raise \$100 each.

They went into the streets with collection cans. They visited bars, movie houses, stores, restaurants and trade unions. Five days later the drive had netted \$110,000. To the far-reaching plans which were

date \$184,000 has been raised. An estimated \$500,000 is required to pay off the deficit and provide for Sydenham into a social institu-

tion without a counterpart anywhere. At present Sydenham is the only hospital where all racial barriers have been lowered, so that Negroes sit on the board of trustees, practice medicine and surgery, conduct research and nurse the ailing. It is to become a more integral part of Harlem's Negro community by correlating sickness with the environment.

Here is an approach to a community medical problem which is unique in this country. Mr. William H. Baldwin, chairman of the board of directors, put the case well when he said the other day that "the light at Sydenham must not be snuffed out merely to meet the hospital needs of Harlem."

Mr. Samuel Rubin, the chemist who came to the rescue with an emergency donation of \$25,000, has expressed similar views. Sydenham's social experiment can best be conducted if it remains a voluntary hospital under private control. It will take about seven millions to make that social experiment, a sum which is not

COLLECTED \$91.97

The following day Dolores turned up at the hospital with \$91.97 collected at the church.

A retired Negro small business man called the hospital to offer the use of his life's savings—\$23,000 saying the hospital could return it

New York (Sydenham Hospital)

Sydenham Drive Sparked by Staff

New York, Mar. 12, 1948



Lee Williams, Harry Balogh, George Frankenthaler, William Gould, Gen. E. F. Jaffe, David Kluger, and William Ziegler, Jr.

Last-Minute Donation of \$25,000 Achieves Goal in Sydenham Drive

were reported to have contributed \$8,000 of this sum.

A last-minute "miracle gift" of \$25,000 from a New York businessman took the emergency campaign by the members of the medical staff, and \$10,000 given on the condition that the drive net \$50,000 from all other sources. Members of the board are committed to raise \$25,000, which a report issued yesterday called a "definite" resource.

The contribution was by Samuel Rubin, chemist, 240 Madison Avenue, who said that his child had been born at Sydenham.

The total results of the drive from all sources were expected to reach \$100,000, officials reported. Already \$90,000 is in hand.

Participation of many small givers in the campaign was given as the reason for its success, although

the amount credited to this source was only \$38,000. Members of the Hospital Employees Union, Local 444, United Public Workers, CIO,

reception this afternoon at the reception will be Jimmy Braddock, former heavyweight champion, who will greet Louis at the reception. A featured guest at the reception will be Jersey Joe Walcott, whom Louis faces in a heavyweight title match on June 23. Others who will be present are Rocky Graziano, Gus Lesnevich, Johnny Dundee, Barney Ross, Beau Jack, Ray Robinson, and Sydenham Fellowship campaign, which is seeking to raise \$500,000 to establish the hospital on a sound financial footing.

Louis Shows Tea Technique Today

Joe Louis will be guest of honor at a "Tea and Crumpet"



Nine year old Dolores Grant, a Sydenham out-patient, shown (upper left) presenting nurse with money she collected at church meeting. The little girl, her leg still in a brace, was run over last October and treated at Sydenham. Directly above, Hospital employees pose before banner of Local 444, CIO United Public Workers.

SYDENHAM HOSPITAL AIDED Police and Fire Departments Give \$1,000 From Basketball Game

Mayor O'Dwyer accepted yesterday on behalf of Sydenham Hospital a check for \$1,000 from the Police and Fire Departments as their joint membership fee in a Save Our Sydenham Society. In a ceremony at City Hall, the Mayor praised the departments for donating the money, which was raised by means of a basketball game.

The hospital announced that other contributors whose \$1,000 gifts enroll them as members in the new society are Cardinal Spellman, the Amsterdam News, Richard Rodgers, Oscar Hammerstein 2d, Spyros Skouras, Trinity Church, Mrs. DeWitt Terheun, Max Schneider and the Pittsburgh Courier. In its drive for \$500,000 to assure its future, the hospital has raised \$300,000.

The Fire Department was represented at the ceremony by Chief of Staff Frank Murphy, and the Police Department, by Chief of Staff August W. Flath. Parole Commissioner Samuel Battle, who suggested the game to raise the fund, also was present.



For Sydenham
PM New York, N.Y. Fri. 4-23-48
Francis Cardinal Spellman presents his personal check for \$1,000 to Harry C. Oppenheimer, president of Sydenham Hospital, as Dr. Peter Marshall Murray, of the hospital's interracial medical staff (left) looks on. The hospital is seeking \$500,000 to continue as the Nation's only interracial voluntary hospital.

Frank B. Adair Goes To North Carolina Hospital

Fri. 10-29-48

NEW YORK — Frank B. Adair, Assistant Executive Director of Sydenham Hospital, has accepted the appointment of Administrator of the Community Hospital, Wilmington, North Carolina. It was announced this week. Mr. Adair came to Sydenham three years ago as Administrative Intern, receiving the first appointment of its kind granted a Negro in voluntary hospitals anywhere in the United States. Subsequently, upon the resignation of S. L. Friedman, M. D., as Executive Director of the Hospital Christian Advocate, official of the Mr. Adair was named Acting Executive Director, pending the appointment of a medical administrator.

Mr. Adair, an alumnus of Morehouse College, did his postgraduate work at the Harvard University Graduate School of Business Administration. He is a member of the American Hospital Association, and holds certificates in Hospital Administration from the American College of Hospital Administrators and in hospital purchasing from the American Hospital Association. He served as honorary vice-President of the Committee on Private Hospitals of the New York Cancer Committee and is a member of the New York Harvard Business School Club. Before coming to New York he served as Business Manager of Dillard University and as Administrative Officer at Tuskegee Institute.

In accepting the new appointment Mr. Adair said that he did so "with a great deal of reluctance, feeling as I do about Sydenham



FRANK B. ADAIR

'Mayor' Joe Louis Aids Sydenham Campaign

Daily Worker
New York, N.Y., Thurs., Jan. 5-48

Joe Louis, appointed Mayor of New York for five minutes yesterday at City Hall ceremonies initiating the Sydenham Hospital Fellowship Institute, said he hoped he

SYDENHAM EXPANDS

Largely as the result of Dr. Alfred E. Cohn's conviction that a hospital should be an integral part of the community it serves, as well as a place where the sick receive medical care, Sydenham in Harlem will henceforth call itself an institution. In 1943 Sydenham Hospital was transformed into an interracial philanthropy where Negroes and whites learned and practiced medicine on a basis of equality and Negro and white trustees constituted a well-balanced administrative body. The experiment was a success. It was also an education for its philanthropic sponsors, for it taught them that Sydenham, situated as it is in Harlem, which has social troubles of its own, cannot ignore the relation of sickness to environment. Sydenham will therefore expand so that it will comprise a hospital and an Institute of Medical and Related Sciences where Negroes and whites will study, conduct research and practice medicine, and an Institute of Community Relations in which the social aspects of sickness and its rational treatment are to be studied in the light of Harlem's needs.

The Fellowship drive seeks a million members and \$7,500,000 to modernize the present Sydenham Hospital and construct a new one at 124th St. and Manhattan Ave.

Sitting in O'Dwyer's chair the champion bantered with the Mayor and newspapermen. When O'Dwyer said to him, "you're going to have an awful headache when you get up," Louis replied that it would be nice "to have the hospital all built" in those brief minutes as head of the city.

After posing for pictures the Negro fistic idol said:

"I've been mayor long enough. I have an appointment. I'll stick to fighting."

O'Dwyer leaned over and told Louis:

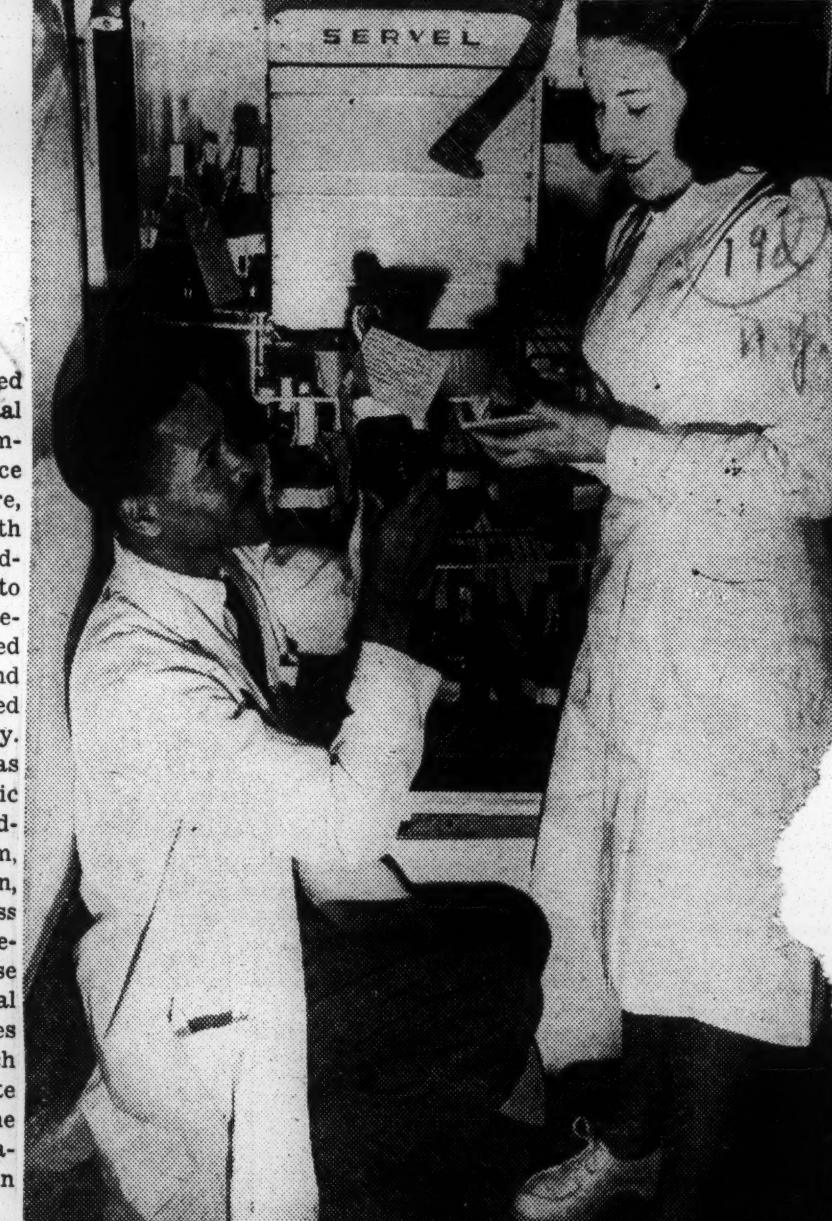
"Mr. Mayor, I wish I could get out of that chair as easy as you can."

With Louis at the ceremony were Dr. Alfred E. Cohn, author of the Sydenham plan, and two nurses, one a Negro and the other white.

Eddie Cantor is chairman of the Fellowship.



LOUIS



There are no restrictions at Sydenham Hospital to bar laboratory technicians John Pritchard and Dorothy Gershen from working side by side. There are no color bars to people who give their blood to the blood bank. The hospital, which seeks to further its interracial program in order to more fully care for the needs of the community, requires \$7,500,000 to get the plan going. Contributions should be sent to Joseph McGoldrick, Treasurer, Sydenham Hospital, 124th St. and Manhattan Ave., N. Y. C.

Photo by John DeBlase, PM
local 444, UPW-CIO, and workers

yesterday went into the streets with collection cans for public solicitation and door-to-door canvassing. Church groups in the Harlem

community volunteered to help. Fifty thousand dollars must be raised by midnight today.

SYDENHAM'S FIGHT ON RACE BIAS CITED

Sydenham Hospital employees, who have volunteered to forego their salaries if necessary to keep the hospital open, joined board members and 250 hospital physicians in a last-minute effort to maintain Sydenham as the nation's only voluntary interracial hospital.

The hospital union members pledged a quota of \$15,000 through

Four of Last Five Appointees

New York, N.Y.
Negroes, Member Notes
21st 2-11-48

1948-1949 AID TO THE NATION IS SEEN

Physician Stresses the Need for Specialists in South, Described as 'Waking Up'

Dr. Peter Marshall Murray, staff member of Sydenham Hospital, an interracially operated hospital in Harlem, said yesterday that four of the last five appointments to the staff of the institution went to Negroes, mainly because there are few other hospitals to which they can be assigned that will give them "the proper advancement to the medical staff."

Dr. Murray addressed a luncheon meeting given at the Roosevelt Hotel by the Sydenham Institution Fellowship at which William H. Davis, former chairman, War Labor Board, received a medal of "fellowship." Representatives of twenty unions were among the guests.

He said that this would be extremely important to the nation in the long run, because of the alarming shortage of Negro specialists. He denied that this undertaking was part of any attempt to segregate Negroes into any single institution for special training, asserting that a bad situation already existed not only in the South, but in the Middle West, the West and the North as well.

Dr. Murray related his findings in several Southern cities where aroused communities had built well-equipped hospitals but without having at hand the specialists to head up the institutions. He said that there were about 25,000 medical specialists in the nation as a whole but fewer than 100 of these were Negroes.

Won't Discuss Governor's Plan

He said that the South was waking up to the health needs of the Negro, and that the Southern Governors had announced plans to further the training of physicians. No matter what "the merits of the plans offered by the Governors," Dr. Murray said that he was not entering a dispute about these plans and was not addressing himself to their merits or demerits.

Dr. Murray said that thirty of the 150 physicians now on the active staff of Sydenham were Negroes who were able to serve not

do it elsewhere," he said. "Sydenham is in the position to train all inance of 'decent communications' between contesting groups would be too small for soon wipe out conflict. The hospital needs of the State of New York, or tall situation proved his point, he said. Dr. Murray said that Sydenham would be to show that he been in the fact that it is inter-

racial, and he racial, and that it would always be a good idea to remain so. Mrs. Charles Poletti, a member of the Negro, is willing to go open up opportunities." Dr. Murray said that Sydenham was not in the position to train Negro specialists, and described between the hospital plant as too small for soon wipe out conflict. The hospital needs of the State of New York, or tall situation proved his point, he said. Dr. Murray said that Sydenham would be to show that he been in the fact that it is inter-

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increased trade-union support of the drive to raise \$7,500,000 for the hospital on a three-year plan. Robert Nathan called the hospital venture "liberalism in practice at a time when liberal practices are needed." *The Times*

GILBERT ENDORSES SYDENHAM PROJECT

Bishop Joins With Leaders of Other Faiths in Support of Hospital Expansion

New York, N.Y.
The Right Rev. Charles K. Gilbert, Bishop of the Protestant Episcopal diocese of New York, joined leaders of other faiths yesterday in endorsing the proposed expansion of the Sydenham Hospital into a social and medical institute that would serve the Harlem and Manhattanville areas of New York. *2-14-48*

Speaking in agreement with the Rev. Dr. David de Sola Pool of the Spanish Portuguese Synagogue and the Rev. O. Clay Maxwell Sr., pastor of Mount Olivet Baptist Church, Bishop Gilbert praised "the unique character" of the proposed Sydenham Institution Fellowship, which would combine medical aid with a completely integrated program of social and religious services.

Bishop Gilbert said that he also spoke for the Rev. J. J. Curry of Catholic Charities, who did not attend the conference. The purpose of the meeting yesterday was to obtain the cooperation of 2,300 churches and synagogues in New York in support of the drive for \$7,500,000 to finance the undertaking, and to meet current needs of the hospital. The meeting was held in the Bishop's office in the Synod House of the Cathedral of St. John the Divine, Amsterdam Avenue and 110th Street.

Bishop Gilbert said that clergymen frequently visited homes that needed a social worker, a physician and the advice of a psychiatrist. If these in turn would invite the church worker, wonders could be worked for such areas as Harlem, he said. At the suggestion of Dr. de Sola Pool, Bishop Gilbert said: "We cannot leave out housing, for housing fits into our picture along with sanitary conditions and recreational facilities, the whole field where we must avail ourselves of the best techniques." *2-14-48*

Dr. Maxwell, whose church of more than 11,000 enrolled members last year made the best Harlem contribution to Sydenham Hospital, said that he could not commit his church to "how much," already having asked its members to join the General Education Board in the support of a Negro boy who will study at Morehouse

College, Atlanta, Ga. He said he was a constant supporter of the hospital and other drives to improve his neighborhood. *2-14-48* More than any single factor in the medical picture, he said, was the fact that the physicians at Sydenham had already undertaken the medical education of the Harlem community, "something which has won me over completely."

WANTS SYDENHAM TO REMAIN FREE

New York, N.Y.
Baldwin Asks City Not to Take Control Despite Financial Needs of Hospital

Wed. 3-3-48
William H. Baldwin, chairman of the board of directors of Sydenham Hospital, asked yesterday that the institution be kept open as a non-city institution to show its worth as an interracial experiment.

He admitted that an emergency fund of \$50,000 was necessary to meet the current expenses and added that \$500,000 would have to be raised to keep the hospital "out of the red" for the ensuing year. But he was opposed, he said, to any move by the city to make the institution a part of the Department of Hospitals.

The light lit at Sydenham must not be snuffed out merely to meet the hospital needs of the Harlem community," he said, calling any move to take Sydenham from private operation a "step backward," since the present policy of the institution "has demonstrated that patients of all races can be served by an interracial staff and treated by specialists, both white and Negro."

Mr. Baldwin, who joined the board of Sydenham to bring to its support the forces of the National Urban League, which he then served as national president, said that "the pay-roll emergency faced now is not the first."

He said that the determination to keep the institution open as a privately financed undertaking must be "sold" to the public, which does not yet appreciate Sydenham's record of achievement, and how it has been "a pioneer among institutions willing and able to give the Negro physician a chance to prove his worth to the community." *The Times*

Negro physicians have been added to the staffs of other New York hospitals which were willing to follow the lead of Sydenham, he said. He believed, he said, that the Harlem community has been appreciative of the efforts made by Sydenham to serve its needs.

Funds raised by the hospital were increased by \$91 through the

efforts of a 9-year-old girl to aid in keeping the doors of the institution open. The girl was Dolores Grant, who came to Sydenham last Oct. 23 with a broken hip and left leg, after being struck by a police car as she was crossing the street at St. Nicholas Avenue and 115th Street. *New York, N.Y.*

The donation was collected from the members of the Mt. Olivet Baptist Church, 201 Lenox Avenue, Tuesday night, after an appeal by the child, who said: "I am here to speak for Sydenham Hospital because their doors are about to be closed by Wednesday. Please help me to raise amount of funds for them because they saved my life and made me walk again."

The total amount raised up to last night was \$28,000, and hospital officials were hopeful the rest would soon be forthcoming.

PLANNING SYDENHAM INSTITUTION FELLOWSHIP DRIVE



Left to right: Rabbi David de Sola Pool, Spanish and Portuguese Synagogue; Bishop Charles K. Gilbert and the Rev. P. Clay Maxwell Sr., pastor of the Mount Olivet Baptist Church, at the Synod House of the Cathedral of St. John the Divine. *The Times*

financial rooting were announced yesterday by hospital officials. Alfred E. Vincent Astor and Julius Klorfein, member emeritus of the sugar manufacturer, were the principal contributors, hospital authorities said. *3-3-48* The emergency drive is for \$500,000 to clear up old debts of \$150,000 and to provide a maintenance fund. Officials reported that the public appeal to save the hospital had netted \$137,000 to date. A campaign to enlist city business men in the fund drive is under way.

SYDENHAM GETS \$137,000
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YOUNGSTOWN HOSPITALS

TAKE COLORED NURSES

1948 (a) 2/27/48

Press Service of The NAACP, New York, N.Y.

Youngstown, Ohio, Feb. 26--Colored nurses have been accepted at the Southside unit of the Youngstown hospital and at the Catholic hospital here, following a campaign initiated by the education committee of the Youngstown branch of the NAACP and carried on in cooperation with the Intergroup Goodwill Council. J. Maynard Dickerson is president of the local NAACP. J.W. 2-27-48

Youngstown, O.

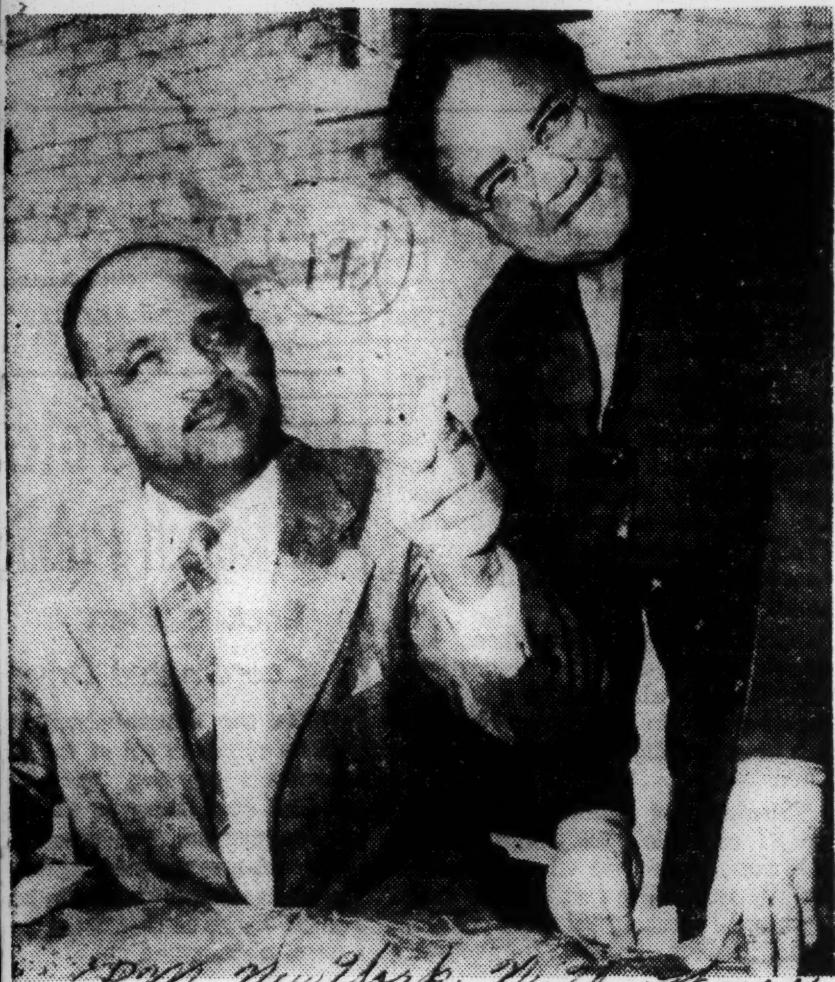
Hospital Hires

Freedman Grad

YOUNGSTOWN, O. (ANP)

Continuing its new liberal policy in hiring, St. Elizabeth's hospital last week employed its first Negro nurse, Mrs. Mabel McCullom Peterson. She recently graduated from the school at Freedman's hospital in Washington.

She is assigned to general duty. The hospital started its new policy two months ago with the admittance of two colored girls to its nurse training school.



Mr. and Mrs. W. J. Edwards
Their story is food for thought

Associated Press Wirephoto

Italy to Hear How Negroes Got a Hospital in Oklahoma

OKLAHOMA CITY

Italians will be told Saturday how a junk business and a serious illness combined to provide Negroes with a \$431,000 hospital here.

This story will be described on the State Dept. *Voice of America* broadcast to prove to Italians that Negroes have opportunities in America. Communists have discounted free enterprise in America in propaganda designed to sway the Apr. 18 Italian elections to their side.

W. J. Edwards, 55-year-old Negro junk dealer of Oklahoma City, reaped a fortune in the junk business. But when his 50-year-old wife was stricken with a serious illness, the only hospital in Oklahoma City available to her had a single crowded ward for Negro patients.

Furthermore part of the cost of construction of the hospital was provided for by Uncle Sam—some \$42,000. The Edwards paid the rest. They even took up duties as foremen to speed up construction, which started 18 months ago.

Build 4 1/2 Million Dollar Structure In Two Years

By FORDIE E. ROSS

OKLAHOMA CITY—“The thing about which we have dreamed, and for the lack of which we have suffered is now a reality.”

These were the words of W. J. Edwards who spoke of his and Mrs. Edwards’ dream to erect a community hospital for which elaborate dedicatory services are set for Sunday, April 18.

Edwards Memorial hospital, 1624 Grand Blvd., a three-floor, 105-bed hospital is a four and a half million dollar philanthropic undertaking realized in less than two years.

In between a telephone conversation, Edwards pointed out that this gift to humanity will have two adequately equipped major operating rooms on the third floor; a nursery adjacent to the OB room; a “galaxy” of preambulators and incubators, all to give ease and comfort to the floor-pacing expectant fathers.

PLEASING INTERIORS

Emergency, X-ray and delivery rooms have not been overlooked and each is decorated so as to emit a pleasant, pleasing atmosphere.

In addition to the most excellent in apartus and equipment necessary for a first class hospital, Edwards stated that a nurses call system has been installed, time-accuracy has been assured by a clock system and proper heating made possible by steam heating.

As far as is known this well equipped institution is the only Negro building in Oklahoma with elevators.

All Negro craftsmen

This beautiful architecture was designed and erected by all Negro craftsmen—contractors, brick-layers, etc.—60 artistically inclined workers did the job. Several started as apprentices.

As the telephone again interrupted his discourse, the thought of his ability to hire 60 skilled workers, erect and equip the hospital, a gift unprecedented in its kind, made one yearn for an explanation as to his initial statement about their having suffered.

In answer Edwards said: “Well, in 1946 Mrs. Edwards had to undergo a major operation, and found herself in a ward in the basement of St. Anthony hospital assigned to Negro patients. Money could not purchase a private room or better facilities if you were a Negro.”

Mrs. Edwards then gave vent to her feelings and remarked: “I had excellent care, the best the hospital could offer, but I was in

dure with any degree of patience and sympathy the cries and groans and pliants of my fellow-patients. I told Mr. Edwards no matter what the cost, something has to be done about that hospital we’d dreamed about and drawn plans for all these years.”

“The lack of a Negro hospital,” continued Edwards, “made us suffer for adequate hospitalization and care for which we felt entitled to as American citizens.”

Interracial Staff

Edwards Memorial hospital will be manned by an interracial medical staff, because “my people have not had equal advantages to make them outstanding surgeons and specialist.” It is the hope of the Edwards that the institution will not only provide schooling for Negro nurses, but training for Negro physicians as well.

The hospital will be the first of its kind in Oklahoma to set up a bed-sector for TB patients as advised by TB specialist the country over. Chest X-rays will be indispensable test for admission.

Many Contribute

The Edwards’ idea to build a hospital quickly found its way into the hearts of all citizens. E. K. Gaylord, publisher of the Daily Oklahoman and Times has given a minacron microscope; Weaver Jordan, loan company operator contributed \$1,000 to equip and adorn the walls with nursery murals; a plaque by Bryan A. Beatty will beautify one of the rooms and Earl W. Baker has volunteered to construct walks and driveways. All of these are contributions by spirit-minded citizens.

“Voice Of America” Tells How Couple Built Hospital

OKLAHOMA CITY—(AP)—“Voice of America,” the U. S. State department’s sponsored broadcast, beamed an overseas program to the U. S. government. Edwards had Italy Sunday to give the people reaped a fortune in the junk business, but when his wife was stricken with a serious illness, he found the form of how a Negro couple that the only hospital in the city

the test, and even took up duties as
fitter to speed up the work which
started 18 months ago.

available to her had only one ward crowded with five other patients. He took his wife to the Mayo clinic, Rochester, Minn. Sunday, however, a 105-bed hospital, patterned after the Mayo clinic, was dedicated in the city—the same day on which the Italians voted in the special election. The government provided about \$42,000 of the costs for construction. The Edwards paid

Oklahoma (Edwards Memorial)

**Human Lauds
Couple For
Worthy Effort**
By Ford Edward Ross

OKLAHOMA CITY, Okla. Our thousand persons, including national, state and local dignitaries, assembled Sunday afternoon at Edwards Memorial hospital to pay tribute to Mr. and Mrs. W. J. Edwards for their unprecedented achievement, the erection of a \$30,000 institution in less than two years.

With the program beamed by radio half across the world, a message of congratulations from President Harry S. Truman, the presentation of an Urban League award, and greetings from Dr. Mary McLeod Bethune, president of the National Council of Negro Women, were combined in a 45 minute dedicatory service for Edwards Memorial hospital.

Notables Present

Dr. E. W. Perry, first vice-president of the Baptist National convention; the Mayor of Oklahoma City, the county commissioner and a host of other celebrities witnessed a dust storm and a barrage of photographers from Associated Press, Life magazine, PM, Chicago Defender, and six white daily newspapers, to speak out in admiration of the achievement of Mr. and Mrs. Edwards. They praised the establishment of a great institute "dedicated to the improvement of health and the relief of human misery."

The broadcast, arranged and directed by Kenneth Johnson, World War II disabled veterans who recently won an award from the National Conference of Christians and Jews for promoting racial unity in his weekly WKY Sunday morning broadcasts, was beamed to Italy under the direction of "Voice of America". Music for the occasion was furnished by the Douglass High School chorus, directed by Z. N. Breaux; the Evelyn Cushman choir sang "Dedication" especially written for the occasion, and the Langston A Capella choir, directed by H. Edison An-

When Johnson gave the green light for the broadcast, Dr. Perry spoke representing the Negro people of the United States. He said because of the Edwardses, "thousands of bruised and mangled bodies of suffering humanity will make a beaten path to this citadel here on the hill".

White Writer Speaks

Edith Johnson, editorial writer for the Daily Oklahoman, compared Mr. and Mrs. Edwards with Booker T. Washington and George Washington. She commented, too, that "were Abraham Lincoln among us today I am sure that he would feel that here, truly, hope is realized. Hope for tomorrow and all the days to come. For this hospital holds out hope not only to those who need its immediate, scientific and efficient ministrations, but hope for the elevation of standards in other places. Example is a powerful influence."

As airplanes sailed in perfect formation over the new three-story hospital Mr. and Mrs. Edwards received from F. D. Moon, principal of Douglass High school, the National Urban League award for outstanding achievement during the year as citizens of the United States.

In her dedication speech, Mrs. Edwards said:

"I dedicate the Edwards Memorial hospital to the service and benefit of humanity regardless of racial or religious affiliations. May it esteem always the principles set forth in the Hippocratic oath—if there be a sick or suffering man, woman or child, that we can aid through our medical facilities—may we carry out this immortal dictum: According to our power and discernment, the Edwards Memorial hospital shall be for the benefit of the sick and will keep them from harm and wrong."

Mr. Edwards, 55, who came here in 1912 and earned \$9 a week in a junk yard, induced Mrs. Edwards, 50, who was a realtor in Texas, to move here where they were married in 1930. Together, they made a fortune in junk and real estate.

"May the Edwards Memorial hospital fulfill this duty and break it not ever—may the fruits of lasting service be its dividend, may it be honored of all men for all time."

President Truman wired congratulations, breaking his precedent in so doing, and said that the achievement of Mr. and Mrs. Edwards "is in accord with our American ideals. Best of all the benefits of the hospital will be extended without consideration of racial or religious improvement of health and the relief of human misery."

**J.C. Victims
Give Hospital
American
for All Races**
Baltimore, Md.

OKLAHOMA CITY—The \$431,000 Edwards Memorial Hos-

pit with a 105-bed capacity, patterned after the Mayo Brothers Clinic at Rochester, Minn., received its first patients last Thursday following its recent dedication, attended by 3,500 persons of both races who inspected its modern facilities.

The payment to the Edwards Hospital, which was established when Mrs. Edwards was refused admission to white hospitals and was under construction before the program was started, will be applied toward the purchase of equipment only.

The Edwards Memorial Hospital

Walter White, the great gladiator for human rights, was many years ago shocked into a sense of great responsibility towards his race, when his father, the victim of an accident, was refused entry to a white hospital, and died for want of proper medical care, and again in later years, an Oklahoma City woman motivated by the same urge has erected a half million dollar hospital in Oklahoma City because of discovery that local and state institutions pay slight attention to the medical care of black folk.

Last Sunday the new Edwards Memorial hospital opened its doors to the public, and has its being, because two Negro philanthropists have decided that the basement ward, into which one of them was crowded here in Oklahoma City, at a time when she were dangerously ill, does not measure up to the health standard society should offer to its 30,000 black citizens in the Sooner capital.

Not often do we find people of large means who have the interest of their race so deeply at heart as do Mr. and Mrs. W. J. Edwards, who have built this fine monument to health, and in the doing of this task have sunk much of their wealth and profits across the years into this wonderful structure. It marks a new and stimulating departure in intra-group effort. It marks the day when Negroes will recognize and utilize strength from within, rather than, as in the past expect the tools of progress to come from without. It represents the finest evidence of achieved citizenship, when Negroes decide to do for their own.

Until we secured the Negro wing at the University hospital in Oklahoma City two years ago, it was practically impossible for Negroes of the city or the state to secure hospital facilities, and this is fairly representative of the paucity of hospital beds all over the United States, so far as Negroes are concerned. It is this inadequate care given to the sick and the diseased that causes the life expectancy of Negroes to lag about ten years behind that of the whites. The average life span has been extended from 35.5 years in 1789 to 64 years today, but the blacks in this country have not been fully released to the full benefit of modern medical facilities.

If the Negro group in America could but see their health needs with the vision of Mr. and Mrs. W. J. Edwards, Oklahoma City, there would be no need of Meharry Medical College closing its doors, for we the Negroes of the United States would see the absolute necessity of underwriting the expense necessary to keep the school running. Think of it! With thirteen million Negroes in the United States today, we are graduating only around 145 Negro doctors per annum. The group has 4000 physicians, 1600 dentists and around 9000 nurses, and yet there is eminent

**Oklahoma Hospital
Gets Federal Aid**

OKLAHOMA CITY, Okla. (N.W.P.A.)—Edwards Memorial Hospital on Tuesday, August 8, received a \$27,500 check as partial payment of a federal aid grant, the second payment made in Oklahoma under the national hospital survey and construction act.

Paul Snelson, director of the State Health Department's hospital division, said the check represents the major share of the grant made to Mr. and Mrs. W. J. Edwards, owners of the hospital.

The Edwards Memorial hospital closing its doors because of giving of not only the local medical society, but the state medical danger of Meharry Medical College closing its doors because of giving of not only the Negroes in the city and state want this new venture none of the 13,000,000 Negroes see the wisdom in financing and if Negroes in the city and state want this new venture not only Meharry, but a half dozen other such institutions to blossom as the rose, the total support of the community as a defense technique, and the desire to perpetuate the must be thrown behind it. Especially is this true of the medical profession. The Negro doctor who for the past fifty years has had to separate from his patient when he reached the cost door of the white hospital in Oklahoma, should welcome this opportunity to not only serve his patient continuously.

but he should eagerly grasp the opportunity to develop in the field of surgery and along other lines as he can in the inter-racial atmosphere offered in the Edward Memorial. It is going to take the unselfish, genuine, sincere and sympathetic support of the entire medical profession to convert the brick and mortar Mr. and Mrs. W. J. Edwards have slung together at 16th and Grand Boulevard, Oklahoma City, into the type of institution that will free Negro doctors from the segregated and jim crow practice of medicine in this state.

In just a short while young doctors just out of college should be doing their internship at Edward Memorial, and a nursing school should be in full blast. If the vision of the total community will measure up to the level of Mr. and Mrs. W. J. Edwards, the hospital dedicated Sunday will some day take its place beside Freedman, Sydenham, Hubbard and Homer G. Phillips. The Black Dispatch salutes the builders of the Edwards Memorial hospital as the First Citizens of the state.

Seventh Day Adventists Open \$500,000 Hospital

Open American
at 9-11-48

MANUFACTURED
MATERIALS
for the new \$500,000
Riverside Sanitarium and Hospi-
tal on the Cumberland River, 5
miles north of Nashville, were
held Sunday, Sept. 5, with the Rev.
J. L. McElhaney, and the Rev.
G. E. Peters, both of Washington,
as principal speakers.

Before 2,000 persons, the new
building, under construction since
1946, was dedicated free of debt.
The 85-bed modern, red brick
institution was designed by Mc-
Kissack and McKissack, colored
architects in Nashville.

The Riverside Hospital, begun
11 years ago, is the direct out-
growth of a personal investment
by Mrs. N. H. Druillard, former
missionary to Africa and public
school teacher.

One of Chain
Operated by the General Church
body of the Seventh-day Ad-
ventists, Riverside is one in a
chain of more than 170 hospitals
and treatment rooms operated by
the Adventists throughout the
world. Another new structure
now being completed is located in
Jamaica, B.W.I., and is operated
by an interracial staff.

All of the institutions make
large use of rational therapy and
diet as adjuncts to general medi-
cine. Riverside has surgical and
obstetrical sections, as well as a
clinic where, for a small fee,
patients may receive expert out-
patient medical care.

Outstanding among guests at
the Riverside dedication were:

Jim McCord, Governor of Tennessee;
Thomas L. Cummings, Mayor of
Nashville; Dr. M. Don Clawson,
president of Meharry Medical Col-
lege; Dr. Charles S. Johnson, presi-
dent of Fisk University; Dr. Walter
S. Davis, president of A. and I. State
College; Dr. John J. Lentz, Davidson
County health director; the Rev.
W. H. Williams, Washington; the Rev.
O. A. Troy, Pasadena, Calif.; the Rev.
J. G. Dasent, Chicago; the Rev. L. H.
Bland, New York; the Rev. J. H.
Wagner, Pine Forge, Pa.; the Rev.
H. D. Singleton, Atlanta; the Rev.
W. W. Fordham, Dallas, Texas; the
Rev. H. R. Murphy, Nashville. The
Rev. V. G. Anderson of Atlanta was
master of ceremonies.



SEVENTH-DAY ADVENTIST CHURCHES SET UP HOSPITAL—The new Riverside Sanitarium and Hospital building, constructed by the Adventist denomination last year at a cost of \$500,000 is the first modern Negro hospital to be set up by the Seventh Day Adventist churches. It will open with a staff of colored doctors and nurses to provide surgical, obstetrical and general medical care as soon as the equipment is installed. A special offering was taken Saturday by churches throughout the nation to be used in equipping the hospital.

CRIPPLED NEGRO AID SET AS ROTARY GOAL

Hospital For Children Fixed As
Long-Range Objective
Memphis, Tenn.
NEW OFFICERS TAKE OVER

By ROBERT GRAY

A hospital for negro crippled children is among the long-range projects of the Memphis Rotary Club.

This is one of the objectives for the ensuing fiscal year discussed at the club's luncheon at the Peabody yesterday as new officers assumed their duties.

'Understanding' Day Urged

The hospital was mentioned by Kenneth Orgill, chairman of the Rotary Community Service Committee. Edmund Orgill is chairman of the Crippled Children sub-Committee, functioning under the Community Service Committee, which is studying the proposed institution.

An "International Understanding Day" for Memphis under Rotary sponsorship was recommended by Caffey Robertson, chairman of the club's International Service Committee.

Mr. Robertson, who also is president of the Chamber of Commerce and the Memphis International Center, pointed out that PanAmerican Week and International Trade Week already are being annually observed here and elsewhere.

The chairman further approved the idea of using the club's \$35,000 student loan funds to finance an exchange of students between Memphis and foreign countries. This would be supplementary to a student exchange program now being sponsored by Rotary International and financed by \$2,000,000 Rotary Foundation. The foundation granted 40 scholarships last year, Mr. Robertson said.

ERP Clinics Suggested

Other possible Rotary projects receiving favorable mention include clinics to show local business men their commercial potentialities under the European Recovery Plan; the teaching of international relations to high school students, and talks at Rotary luncheons by foreign born citizens.

A balanced club program was stressed by Dr. Anthony Dick, chairman of the Club Service Committee. He pointed out the relative importance of attractive programs, attendance, fellowship, membership, entertainment and other activities under his committee.

Practicing the ideals of Rotary during one's daily job or profession is among the precepts stressed by

Charles Eubanks, chairman of the Vocational Service Committee.

The four chairmen participated in a panel discussion and responded to questions presented by Joseph Fowler and Dr. Ralph Rychener.

In turning over the gavel to Bayard Boyle, new president, Walk C. Jones Jr. described him as a "good business man, a good soldier and a good Rotarian." President Boyle, on behalf of the membership, presented the retiring president a diamond-rimmed Rotary pin.

Rio Convention Described

The new president, who took over with "326 members, no debts and a bank balance," briefly described the Rotary International Convention which he attended during May at Rio de Janeiro. He emphasized the scenery, hospitality and economic greatness of Brazil and the fellowship of the convention.

Other officers who took their posts yesterday along with the new president include Will H. Bryce, vice president; Howard Moore, treasurer; Oliver P. Cobb Jr., and Herbert Jordan, sergeant-at-arms. Besides the officers, the new board of directors is composed of William Bailey, Joe E. Davis, Frank Flournoy, Wallace Johnston, Mr. Robertson, Horace Smith, Norfleet Turner and Mr. Jones.

Capt. Winfield Scott Cunningham, commanding officer of the Naval Air Technical Training Station at Millington, will be next week's speaker. He will discuss "My Experiences as a Prisoner of War."

Mr. Robertson, who also is president of the Chamber of Commerce and the Memphis International Center, pointed out that PanAmerican Week and International Trade Week already are being annually observed here and elsewhere.

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An appeal to 1900 Memphians to contribute \$100 each for Memphis' proposed new negro hospital was made yesterday by E. H. Demetrio, one of the project's leaders.

The proposed 100-bed institution would replace the existing 30-bed

Terrell Memorial Hospital and would be built on the hospital grounds at 698 Williams, Mr. Demetrio said. Total cost is estimated at about \$250,000, of which \$60,000 has been raised, including about \$12,000 in cash and the remainder in labor and materials pledges.

Would Meet State Requirement

"Memphis negroes have three hospitals with a total of 100 beds," he continued. "Since the requirements of state and medical authorities call for a 100-bed hospital, as a minimum, for training nurses and internes it is very necessary to build a new hospital with all modern requisites."

He explained that there is no provision at John Gaston Hospital for training negro doctors or nurses.

He added that he considered a gift to the hospital a donation to the fight against Communism, feeling that if donations are not made by private citizens voluntarily then the state will be forced to provide such service, a step he described as being another on the road to Communism.

To Be Non-Sectarian

Mr. Demetrio emphasized that the Peoples Hospital would be non-sectarian. It would be administered by a board of directors. Bishop A. B. McEwen, negro, of the Church of God in Christ, is president of the board.

Reported yesterday were a gift of the first truckload of lumber, offered by the Chambers-Ezell Lumber Co., and a gift of 1000 bricks by Dr. B. F. McCleary, negro.

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NEGRO WARD REOPENED AT MEMPHIS HOSPITAL

Male Surgical Care At John Gaston Increased

The John Gaston Hospital reopened one of its negro male surgical wards yesterday, Lawrence W. Dean, superintendent, said.

The hospital was forced to combine two negro male surgical wards about a month ago because of a critical shortage of nursing service.

"The nursing situation has eased somewhat, enabling us to reopen the ward," Mr. Dean said. "We hope to be able also to reopen one of our negro female wards soon," he added.

Two negro female surgical and medical wards were combined about the same time as the negro male wards because of lack of nurses.

Seventh Day Adventists Build Modern 85-Bed Facility For Negroes

By L. B. REYNOLDS

NASHVILLE, Tenn. — Taking the lead in outstanding welfare work, the Seventh Day Adventists, one of the least publicized of American Churches, recently dedicated a new \$500,000 modern hospital for Negroes five miles north of here on the Cumberland river.

With more than 2,000 spectators present for the momentous occasion, the Rev. J. L. McManey, president of the General World Conference of Seventh Day Adventists, and the Rev. G. E. Peters, high ranking church official, both of Washington, D. C., were the principal speakers.

Completely free of debt, the dedicated structure, an 85-bed modern red brick institution was designed by McKissack and McKissack, Negro architects of Nashville, one of the largest firms of the kind in the nation.

Construction Began In '46

Dedicated as the Riverside Hospital, the building was begun in 1946. The project was first launched 21 years ago as the Riverside Sanitarium and Institute for Negroes. It is the direct outgrowth of a personal investment by Mrs. N. H. Druillard, former missionary to Africa and a public school teacher.

A "near physician" herself, Mrs. Druillard, a red-headed Scotswoman, led out vigorously in the sanitarium program and greatly encouraged, too, the teaching of agriculture and training in the use of massage and hydrotherapy.

Operated by the General Church body of the Seventh-day Adventists, Riverside is one in a chain of more than 170 hospitals and treatment rooms operated by the Adventists throughout the world.

Another new structure now being completed is located in Jamaica and is operated by an interracial staff. All of the institutions make large use of rational therapy and diet adjuncts to general medicine. Riverside has surgical and obstetrical sections, as well as a clinic where, for a small fee, patients may receive expert outpatient medical care.

Outstanding among guests for the Riverside dedication include:

Hon. Jim McCord, Governor of Tennessee; Hon. Thomas L. Cummings, Mayor of Nashville; Dr. M.

Don Clawson, President of Harry Medical College; Dr. Charles S. Johnson, President of Fisk University; Dr. Walter S. Davis, President of A. and I. State College; Dr. John J. Lentz, Davidson County health director; Rev. W. H. Williams, Washington, D. C.; Rev. O. A. Troy, Pasadena, California; Rev. J. G. Dasent, Chicago, Illinois; Rev. L. H. Bland, New York; Rev. J. H. Wagner, Pine Forge, Pa.; Rev. H. D. Singleton, Atlanta, Georgia; Rev. W. W. Fordham, Dallas, Texas; Rev. H. R. Murphy, Nashville; Rev. V. G. Anderson of Atlanta will be master of ceremonies.

Tours of the new building will be conducted in the morning prior to the dedication exercises.

by the city or the Negro part of
General Hospital.

Meharry Beds Offered For Rent To 4 Southern States

Nashville Offers Plan For Indigents To Save 100-Bed Institution

July 1, 1948
Hubbard To Ask
\$4,000 For One
Bed, One Patient

NASHVILLE, Tenn. — (NNPA) — Beds in Hubbard Hospital will be offered for rent to four southern states for use by colored indigent patients after July 1, Meharry Medical College announced last Monday. Director of the Hospital said 126 day.

Dr. Murray C. Brown, medical beds will be offered for rent to Georgia, Florida, South Carolina, and Alabama. The hospital will ask \$4,000 for the reservation of one bed and care of one patient for a year. Dr. Brown said.

Meharry announced earlier last Monday that the hospital will be closed July 1 unless additional funds are found for its operation. Hubbard

Hospital has been operated by the medical college in the past but Brown said Meharry is losing \$382,000 a year on its investment.

He said the plan to offer beds to other states was made necessary by the recent action of Congress in refusing to give Congressional consent to the compact of fourteen southern states to set up and maintain regional school.

NASHVILLE — The scheduled closing of Meharry Medical college's Hubbard hospital on July 1, did not come off as was feared for a plan was approved here last week whereby the hospital can continue to operate under its own steam with an assist from the city.

At a meeting of representatives of all sides involved, it was agreed to follow a plan whereby the city board of hospital commissioners will route indigent Negro patients to Hubbard first, utilizing its 100 standard beds and sending the overflow to substandard beds at General hospital.

Among those attending the meeting were Dr. M. Don Clawson, Meharry president, G. W. Huffman, secretary of the board of trustees; and Mayor Cummings.

City To Pay For Indigents

By this means, Hubbard can be kept open by financing its own operation, and the city will pay \$8.50 a patient day. Earlier, the hospital had sought a \$225,000 guarantee from the city to cover 12 months' operation. Since the city refused, an alternate agreement was presented to guarantee the hospital a minimum hospital census.

Modifies First Plan

The plan finally agreed was a modification of the city's plan and provides for the city to underwrite the care of patients, not handled at General hospital, at \$8.50 a day. Hubbard now handles an average of 79 patients daily.

Dr. Walter M. Morgan, vice-chairman of Meharry's board of trustees, had written Sam Davis Bell, vice chairman of the city board of hospital commissioners, that the city's offer should read:

CITY NEEDS HUBBARD

Dr. W. W. Wilkerson, president of the Nashville Academy of Medicine said:

"Should the regional plan for Meharry include Hubbard Hospital, the beds would be filled largely by patients outside of Davidson County. The result would be the same as if the State assumed the responsibility. This must not occur. The

board estimated that between \$215,000 and \$225,000 would be earned by Hubbard if the overflow from General provided a daily average of 70 patients. The

Nashville's Pledge Of Aid Strengthens Support for School

July 10, 1948
(Special to The Courier)

NASHVILLE, Tenn. — Now that the city of Nashville has guaranteed financial aid in sufficient quantity to assure that Hubbard Hospital will remain open, citizens, physicians and members of the city government are ready to turn thumbs down on any regional plan which would take the hospital away from them.

Mayor Thomas L. Cummings, in a statement this week, said, "Meharry Medical College and Hubbard Hospital are here to stay and to serve the people of Nashville."

CITY NEEDS HUBBARD

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"Should the regional plan for Meharry include Hubbard Hospital, the beds would be filled largely by patients outside of Davidson County. The result would be the same as if the State assumed the responsibility. This must not occur. The

board estimated that between \$215,000 and \$225,000 would be earned by Hubbard if the overflow from General provided a daily average of 70 patients. The

years to come. Hubbard must be kept open for Nashville's use.

Dr. Murray C. Brown, medical director at Hubbard, said he believed the arrangement with the city may be continued after the twelve-month period in the agreement made last Friday night.

CLAWSON STATES ALTERNATIVES

Dr. M. Don Clawson, president of Meharry, said the school must have tax support after July 1, 1949, when the Carnegie Foundation withdraws its support.

If the regional plan is adopted by Congress and the Southern States, he said Nashville should build a Negro hospital on or near the campus. In any case, he said the city should let Meharry operate a Negro hospital, either a new one built

Meharry's Hubbard, Hospital To Operate Under Own Steam

July 10, 1948
NASHVILLE — (ANP) — The scheduled closing of Meharry Medical college's Hubbard hospital on July 1, did not come off as was feared for a plan was approved here last week whereby the hospital can continue to operate under its own steam with an assist from the city.

At a meeting of representatives of all sides involved, it was agreed to follow a plan whereby the city board of hospital commissioners will route indigent Negro patients to Hubbard first, utilizing its 100 standard beds and sending the overflow to substandard beds at General hospital.

By this means, Hubbard can be kept open by financing its own operation, and the city will pay \$8.50 a patient day. Earlier, the hospital had sought a \$225,000 guarantee from the city to cover 12 months operation. Since the city refused, an alternate agreement was presented to guarantee the hospital a minimum hospital census.

The plan finally agreed was a modification of the city's plan and provides for the city to underwrite the care of patients, not handled at General hospital, at \$8.50 a day. Hubbard now handles an average of 79 patients daily.

CAN BE KEPT OPEN

Dr. Walter M. Morgan, vice-chairman of Meharry's board of trustees had written Sam Davis Bell, vice chairman of the city board of hospital commissioners, that the city's offer should read: "If the routing of indigent colored patients by the

board is made first to Hubbard hospital, utilizing first the 100 standard beds available there and thusing the substandard beds at General hospital for the overflow, Hubbard hospital can be kept open and we can finance its operation."

The board estimated that between \$215,000 and \$225,000 would be earned by Hubbard if the overflow from General provided a daily average of 70 patients. The city is ready to draw up a formal contract, but awaits the disposition of other matters by the college.

One of these things includes the liquidation of a \$165,000 indebtedness. The trustees have already approved the release of \$170,000 in Carnegie endowment funds, but are awaiting the approval of the Carnegie foundation.

Among those attending the meeting were Dr. M. Don Clawson, Meharry president, G. W. Huffman, secretary of the board of trustees, and Mayor Cummings.

Nashville Globe and
Hubbard Hospital Saved

no such announcements with regard to
Fisk University? 7-2-48

Mayor Thomas L. Cummings and the city board of hospital commissioners appear to have reached a fair and reasonable solution of the problem of keeping Hubbard Hospital open. They are going to guarantee the hospital that the city will send to Hubbard 100 of its indigent patients and pay for them at the rate of \$8.50 a patient day. Other indigents over the 100 are to be sent to the General Hospital.

It is thus shown that the "crisis" in the affairs of Hubbard Hospital has not been as frightening as we have been led to believe by all of the publicity we have been reading. Nashville's city administration is not composed of a heartless group of officials. The mayor and others associated with him, doubtless, long ago would have done their part to absorb the cost of hospitalizing this city's indigent citizens had the matter been placed before them properly.

There has been no need for persons who hold jobs at the hospital to engage in threats of political reprisals against the mayor because heretofore the city has not financially supported the hospital. The plain fact is Meharry trustees and officials have not been business-like and open and above board in their dealings with Nashville officials and the general public, the result of which is this crisis, or at least the rumor of a crisis. Fri. 7-2-48

Meharry Medical College and Hubbard Hospital are just as much an asset to Nashville's white population as to its colored population. It is well to point this out—point out how many white people have good jobs and how many white business concerns make money servicing the college and the hospital, when conducting any drive for funds. It should not be pretended that sympathy for the sick and the dying colored population alone is what gives fright when announcements are made that Meharry and Hubbard are about to breathe their last. Nashville

Regard for and co-operation with the notable philanthropists of the North who established both the college and the hospital ought to be shown by ALL of the beneficiaries. Had this been done all along these foundations very probably would not now be singling out Meharry and Hubbard as the institutions they are no longer willing to give financial aid. Globe

How come the foundations have made

Atlanta Daily World



1946 was a normal day in his life

MARCHING AGAINST POLIO—until he complained to his parents Chicago, Ill. . . . Shouldering one of a headache. Then, when his of his crutches like a rifle and temperature rose and his stomach tossing a salute, Joe Willie became upset his life was changed Brown, 5, of Chicago, demonstrates that he is eager to carry sharply. *Tri. 1-14-48* in the fight against infantile Now Joe Willie represents all paralysis. He was chosen as one the little Negro boys who have had of the two national poster boys for the 10th annual March of their childplay disrupted by the Dimes, January 15-30. Joe Willie dread poliomyelitis. He has been was stricken in July, 1946, and chosen as one of the two national after treatment by the National poster boys for the 1948 March of Dimes, January 15-30, marking his tenth anniversary of the Foundation for Infantile Paralysis. One leg brace has now been reduced and the boy hopes for full recovery.—(INP)

Paralysis.

As if it were not tragey enough when little Joe Willie was stricken a few hours later on the same July day, his younger sister Ethel Bertha, now 4 ears old, also became a victim of polio.

Negro To Be Polio Poster Boy

The Lakeview Church
National Foundation

Poster Boy

CHICAGO—Five year old Joe Willie Brown was a normal, frolicking lad before he was stricken with infantile paralysis July 22. His parents, Mr. and Mrs. Joseph P. Brown, of 6240 S.

Michigan Ave., rushed him to the Cook County Contagious Disease Hospital. First his left leg became weak, then his other leg and his arms and shoulders became paralyzed. Joe Willie was indeed a very sick lad. *9-9-48*

The Cook County Chapter of the National Foundation for Infantile Paralysis volunteered its aid as it does for every case by writing both parents and doctor of the availability of its services. Mrs. Brown came to the chapter and it was arranged that all financial responsibility would be assumed for Joe Willie and his sister.

Up to last August 29, this had amounted to a staggering \$2,599.24 for Joe Willie alone.

On August 5, he was moved to Provident Hospital on Chicago's South Side where daily he received physical therapy treatments, hot packs at first, later in a warm water tank. But paralysis had made deep inroads in both legs, and arms. *The Lakeview Church*

By May 1947 he had progressed enough to be released from the hospital wearing long leg braces now and getting medical care as an out patient.

In two more months doctors reported splendid recovery of his arms and the long brace was removed from his left leg. But his right showed little or no progress. It still needs a brace. *Sister Kenny*

Joe Willie has hopes for a recovery. When he is a few years older, the doctor may try reconstructive surgery. For the present he receives daily physical therapy at the Christopher School, one of Chicago's special schools for crippled children, where his teacher says he "is doing fine". *1-9-48*

Every six weeks he reports at Provident Hospital for a check up and additional treatment. His sister is nearing complete recovery except for one eye muscle.

The big moment of Joe Willie's life came a few weeks ago when he met Basil O'Connor, president of the National Foundation for Infantile Paralysis, on Mr. O'Connor's visit to Chicago. Mr. O'Connor presented Joe Willie with an apple and some giant strawberries. Little Joe Willie still talks about those strawberries. *Tri.*



RECIPIENT OF \$5,400 for two-year course in treatment of infantile paralysis at Sister Kenny Institute, Minneapolis, Minn., Mrs. Ruth Ellen Hill, left, Michigan, ~~Michigan~~ here, and Miss Juanita Marino (right) of Evanston, are shown at famous polio treatment center observing Polio Technician Harriet Dreher treat abdominal muscles of four year old Jerome Swanson, a polio patient. Awarded scholarships by Illinois chapter, Sister Kenny Foundation, they will be assigned to Sister Kenny Clinic to be opened here upon completion of course. Berg Photo.

March Of Dimes Provides 18 Scholarships For \$31,666

NASHVILLE, Tenn.—Funds raised in last year's March of Dimes of the National Foundation for Infantile Paralysis provided eighteen scholarships amounting to \$31,666. Charles H. Bynum, director of interracial activities of the National Foundation, announced at a kick-off dinner meeting of Nashville volunteer workers.

Mr. Bynum stated that nine states are represented by the scholarship winners. They are Alabama, Florida, Georgia, Illinois, Mississippi, Missouri, New York, South Carolina and Tennessee. Illinois had the largest number with four winners.

The students are enrolled at Columbia, Howard, Northwestern, and Harvard Universities; the College of Medical Evangelists, Loma Linda, Calif.; North Carolina State College, Durham, N. C.; the Universities of Illinois, Iowa, Chicago, Pittsburgh and Pennsylvania; City Hospital, Cleveland, Ohio; Provident Hospital and Children's Memorial Hospital, Chicago, Illinois.

Scholarship awards by fields of study were: one public health, four pediatrics; one orthopedics, two medical social work; seven physical therapy, two health education; and one orthopedic nursing.

Epidemic Erases Racial Barriers in Carolina

By Mark Ethridge, Jr.

RALEIGH, July 31.—North Carolina's infantile paralysis epidemic has become the Nation's worst since Minnesota's 3183 cases in 1946, but State Health Officer Roy Norton believes that it may have reached its peak.

There have been 960 cases of polio in North Carolina since January and 53 deaths. There were more cases in the first 18 days of July than in the whole month of June, and 244 cases were reported last week.

In the last five days of the week, however, an average of 26 cases daily was reported, against 47 for each of the first two days.

"Our experience has been," Dr. Norton said, "that there is a tendency for the number of cases to level off about this time of year. There is good reason to believe we have reached the peak."

Infantile Paralysis

a 24-hour basis and the 140-bed building is expected to be completed in September.

Although very little is known about polio and its transmission, many North Carolina cities are pushing fly-and-rat-killing campaigns and some are spraying their entire areas with DDT. But cold weather is the only proved deterrent, and there is no immediate prospect of that in North Carolina.

Foundation Helping

THE NATIONAL Foundation for Infantile Paralysis has thrown its resources into the epidemic. Dr. Kenneth Landauer, its medical director, has been here since July 20, and a Foundation team of five doctors and nurses arrived shortly afterward. They are touring the epidemic area, a 160-mile belt running East and West across the center of the State.

Local chapters of the Foundation now are spending money at the rate of \$150,000 a month, under instructions from Philip S. Randolph, the Foundation's State epidemic coordinator, to pool 50 per cent of their funds for the fight against the disease, and that sum is being supplemented by money from New York.

The problem of hospital beds apparently has been solved. The largest polio hospital in the State, at Greensboro, has increased its capacity from 33 patients to 62, and is breaking local precedent by admitting both white and Negro cases. Said a nurse there: "When polio starts striking at one race of children only, then we'll handle it that way."

The Kate Bitting Reynolds Memorial Hospital at Winston-Salem, one of the best equipped hospital for Negroes south of Baltimore, has been designated the State center for the treatment of Negro polio patients. It can handle only 18 patients now, but it is getting more nurses and expects soon to have more than 30 beds.

Army Camp Used

CAMP SUTTON, a war-time Army barracks in the southern part of the State, was opened two weeks ago with a capacity of 70 patients. Four days later it could handle 300.

In all, there are 23 North Carolina hospitals now handling polio cases. When the 1944 epidemic struck, there was none, and a special one was built at Hickory.

The National Foundation has announced that 270 nurses now are on polio duty in North Carolina, and it is prepared to provide 150 more.

Most of the physical therapy work in infantile paralysis must be done in the convalescent stage, which follows about two weeks of active polio. A separate hospital is needed for these treatments, and none was available.

Guilford County, the hardest hit, set out to raise \$50,000 throughout the State for a semipermanent convalescent hospital. City authorities of Greensboro, the county seat, contributed land. The campaign began July 1, and by July 20 more than \$180,000 had been raised. Construction is under way on

19e 1948

March of Dimes

What Negroes Are Doing

BY MATTIE B. HOWE

Announcement of the two-weeks extension of the March of Dimes campaign has put new life into the volunteer forces under direction of Mrs. Larnie J. Williams.

With an announced quota of \$10,000, the Jefferson County Negro division, like many others both locally and nationally, had been greatly handicapped by severe weather. Although the campaign was pushed from every section the goal had not been reached at the end of the first two weeks solicitation.

In commenting on the effort, Mrs. Williams stated that in spite of highly unfavorable weather, volunteers are still ringing doorbells and calling from every corner, "Please Join the March of Dimes."

Working on a program of medical care, education and research, thousands of dollars have been spent in the interest of Negro people. A grant of \$8,800 was made to North Carolina College for Negroes to train teachers, supervisors and coordinators of health education; \$67,670 has been granted Meharry Medical College and disbursements at the Tuskegee Institute Infantile Paralysis Center for 1947 totaled \$165,910. An additional appropriation of \$60,000 was authorized for nurse training. In nine years Tuskegee Institute has received \$1,300,300 from the National Foundation.

**March Of Dimes
Provides \$31,666
For Scholarships**

19e 1-13-48
NASHVILLE, Tenn. — Funds raised in last year's March of Dimes of the National Foundation for Infantile Paralysis provided 18 scholarships amounting to \$31,666. Charles H. Bynum, Director of Interracial Activities of the National Foundation, announced at a kick-off dinner meeting of Nashville volunteer workers. *1-13-48*

Mr. Bynum stated that nine states are represented by the scholarship winners. They are Alabama, Florida, Georgia, Illinois, Mississippi, Missouri, New York, South Carolina and Tennessee. Illinois had the largest number with four winners. *19e 1-13-48*
Physicians receive training through funds made available to the National Foundation for Infantile Paralysis by the March of Dimes, January 15-30. Five of the six Negro physicians now studying under National Foundation grants are shown above. They are, left to right: Dr. Alonzo S. Yerby, Margaret M. Lawrence, at Columbia University College of Physicians and Surgeons; Dr. Oliver W. S. Davis, the University of Iowa. Not shown is Dr. Robert D. Nesbitt, the University of Illinois. *19e 1-18-48*

The students are enrolled at Columbia, Howard, Northwestern, and Harvard universities; the College of Medical Evangelists, Loma Linda, Calif.; North Carolina State College, Durham, N. C.; the universities of Illinois, Iowa, Chicago, Pittsburgh and Pennsylvania; City Hospital, Cleveland, Ohio, Provident Hospital and Children's Memorial Hospital, Chicago, Illinois.

Scholarship awards by fields of study were—one public health; four pediatrics; one orthopedics; two medical social work; seven physical therapy; two health education; and one orthopedic nursing.

First Line Fighters *19e 1-18-48*



FEPC and the South

Atlanta Constitution
Editor Constitution: I do not quite see why the Southern Representatives and Senators are so strongly opposed to a Federal Fair Employment Practice Act to forbid racial discrimination in job opportunities when it seems clear that such a measure if enforced would be to the economic advantage of the South.

The proposed Federal Fair Employment Practice Act applies only to industries hiring 50 or more people. Agriculture and the small locally owned industries in the South, therefore, would naturally be exempt. If the larger industries, which are mostly Northern owned, had to pay their Negro employees equal pay for equal work, and had to give them opportunities for better-paying jobs if they were qualified, the money mainly would come out of the pockets of Northern stockholders, and would be spent with local merchants in the South instead of mainly in the North. Clearly the South would gain from a strictly economic point of view. *June 6-1-48*

In so far as it is true that economy of the South is a colonial economy, Southern Congressmen and Southern publicists are not serving the best interests of Southern people when they oppose a measure which would be paid for mainly by Northern interests and would mean the spending of additional money by and with Southern residents.

Please do not tell me that a Federal Fair Employment Practice law would necessarily break down the Southern pattern of racial segregation. A law which would tend to provide equal pay for equal work and equal job opportunities for equal training and ability does not necessarily mean that people of different races would have to go to the same church or send their children to the same school. *June 6-1-48*

New York. ALFRED BAKER LEWIS.

(Editor's Note: The proposed FEPC violates liberties guaranteed by the Constitution because it would take from the employer the right of exercising his choice in hiring workers.)

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Meharry-Fisk
Daily World
Report Accepted
Atlanta, Ga.
By Health Group

Sun. 2-29-48

NASHVILLE, Tenn. — The acceptance of the preliminary report of the Fisk University and Meharry Medical College Preparatory Commission for the first international Congress on Mental Health which meets in London this August, has been announced by Dr S. Oliver Roberts, chairman of the group. Dr. Roberts, associate professor of Psychology at Fisk University revealed that the notice of acceptance had been received from both the New York and London offices of the Congress. *2-29-48*

The Nashville Commission was organized in December at the request of Lawrence K. Frank, executive secretary for the Central Commission on Mental Health and World Citizenship. Recommendations formulated at the Congress will serve as a basis for national and international planning and will be referred to the World Health Organization and UNESCO. This Congress is the first step toward mental health planning on a world scale. Preparatory groups are being established throughout the various participating countries and their reports will form the nucleus for discussions at the Congress.

QUALIFIED MEMBERS

Drawing upon the interracial and international staff of Fisk and Meharry and research resources in sociology, psychology, medicine, education and religion, the Fisk Meharry Commission has a list of exceedingly well qualified members. Dr. Charles S. Johnson, a member of UNESCO, and recognized as one of the world's most distinguished sociologists, is serving with this commission. *Daily World*

The group has chosen to develop a report on the mental health and world citizenship of Negro American youth. Their goal is to determine the "Effects of the cultural marginality of Negro American families on the mental health of children and their participation in world citizenship." Such factors as migration, employment, income, health, housing, education, recreation and religion, together with their influence on personality and mental health will receive consideration. To date this is the only commission to indicate its desire to study the problems peculiar to the American Negro. *Sun. 2-29-48*

Prejudices In Journal Of Hospitals And Colleges Blamed

Post Writer Shows
How Discrimination
Affects The Nation

Jan. 1-31-48
PHILADELPHIA, Pa. — (ANP) — Chief cause for the high rate of disease and death among Negroes is the endless practice of discriminating against Negroes in the medical field. This discrimination takes the form of prejudice against Negro students in medical schools and against colored medical graduates in hospitals.

The Jan. 24 edition of the Saturday Evening Post carries an article by Henry R. and Katharine Pringle, which deals with the evils of discrimination in medicine. Entitled "The Color Line in Medicine," the article declares, "Contagion knows no color line."

"The federal government, the states and cities of this vast, rich nation spend many millions of dollars every year to improve public health. Yet, with tragic imprudence, we are doing very little to strengthen one of the weakest links in this endless chain of money and effort. We are perpetuating, through prejudice, a critical shortage of Negro doctors—a situation which contributes heavily to the high rate of Negro mortality and results in the spread of disease through colored and white populations alike."

ONLY 4,000 NEGRO DOCTORS

The Pringles, who conducted a two month's investigation of opportunities for Negroes in the medical colleges and hospitals, uncovered the fact that there are only 4,000 Negro doctors now practicing medicine. This figure is more than 400 per cent less than that for white physicians. It also points a need for an estimated 5,300 more to care for the increasing Negro population.

They showed that the current national average is one Negro doctor to every 3,337 Negroes, although the accepted minimum standard is one to 1,500. In Mississippi the ratio is one to 18,527.

"One important reason for this acute shortage of skilled medical men is the discriminatory policy of our medical schools in admitting minority students. Discrimination against Negro students is common in the North as well as in the South, and is not limited to the medical colleges.

"Only two of the 77 medical schools freely admit Negro applicants and these are Negro institutions. Many hospitals, vital to the training of all physicians, close their doors to colored medi-

cal graduates."

FALSE NOTION 1-31-48

The Pringles scotched the "widespread notion that Negroes, as a race, are especially prone to disease." They pointed out that no competent scientist agrees with that belief, but rather that "Negroes get sick because of poverty and neglect, exactly like all other members of the human race."

"Generations of bad housing, improper food and economic insecurity do not produce hardy men and women, but there is no proved racial susceptibility. More Negroes get tuberculosis and pneumonia, contract venereal disease and other ills because, in the main, they live under worse conditions and because they do not receive adequate medical care. Then they spread infection."

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FSA Administrator Says Better Health Is Goal

Atlanta Daily World
Atlanta, Ga.

WASHINGTON, D. C.—(NNPA)— The goal of this nation is to see that all of the people have a great opportunity to lead healthier lives, Federal Security Administrator Oscar R. Ewing declared last Friday in commenting on National Negro Health Week April 4 to 10.

4/1/48
National Negro Health Week is more than "a program for emphasis on the particular health problems of the Negro people," he said. "It is more than demonstration of self-help and team work to lessen illness and death.

Directing attention to the national health problem, Mr. Ewing said "We do not have enough hospitals, health centers, medical school facilities and trained persons. We do not have enough physicians, research scientists, dentists, nurses, sanitary engineers or laboratory technicians to give our nation the guarantee of good health which is inherent in the principle of American democracy."

Atlanta 4/1/48
Colored people are among the greatest sufferers from inadequate health service, he stated.

HIGHER RATE

Mr. Ewing pointed out that the death rate among colored people is about a third higher than for the nation as a whole, that their life span is ten years less than that of the white people, than there is one white physician for every 850 white persons but only one colored physician for every 4,400 colored persons, and that there is one dentist for every 1,865 persons in the United States but only one colored dentist to every 8,745 colored persons.

He also pointed out that to meet these deficiencies among colored people there are relatively less opportunities for medical education and for graduate and specialized training in modern hospitals.

"The medical schools that are open to the training of Negro students chiefly Howard University School of Medicine in Washington D. C. and Meharry Medical College in Nashville, Tenn.— can not produce enough doctors to meet the current losses by death, disability and retirement," Mr. Ewing declared.

TREMENDOUS STEPS

"You can easily visualize the tremendous steps which must be taken in the medical education of Negro youth if medical care for the Negro people is to reach merely

the average of the nation as a whole," he said.

Mr. Ewing stated that the hospitals and health centers made possible the National Hospital Survey and Construction Act to provided needed services require an adequate number of physicians, nurses and other professional personnel.

Thurs 4-1-48
President Truman has asked him to draft a comprehensive 10-year program to raise the health standards of the American people. To have all available counsel and guidance, Mr. Ewing has called a health conference in Washington May 1-4.

"As serious as the total national health problem is," Mr. Ewing said "the Negro tenth of our population suffers greatly because of the lack of medical education, medical personnel and health facilities.

ANA Accepts Negro Nurses

Chicago, June 1 (AP).—The American Nurses Association today voted to allow Negro nurses to join the ANA direct in States where they are barred from State nursing associations.

A spokesman said ANA membership is composed of the State groups. *Washington, D. C.*

He added that today's action would open ANA membership to an estimated two to three thousand Negro nurses barred from their district and State groups. He did not name the States.

Wed. 6-2-48
Negro Nurses Here

Have Own Group

The local affiliate of the American Nurses Association, does not accept Negro nurses as members.

However, nurses graduated at Freedman's Hospital have had their own association with the status of a State group for a number of years and have been eligible to join the ANA directly. *6-2-48*

The ANA move will permit other Negro graduate nurses in the District not members of ANA affiliates to join the ANA directly.

NATIONAL NURSES GROUP OPENS MEMBERSHIP TO NEGRO NURSES; OVERRIDES BIASED STATES BY TAKING IN NEGROES IN NATIONAL GROUP

ESTELLE MASSEY OSBORNE HEADS SPEAKERS' LIST

CHICAGO — (ANP) — The house of delegates of the American Nurses' association, which was in town more than 10,000 strong, attending the 1948 biennial nursing convention, passed a resolution here early last week opening the doors of membership to Negro nurses, despite biased set-ups in some southern states. This signal action allows Negro nurses to join directly if they reside in those states where the state groups have refused them local membership.

Mrs. Estelle Massey Osborne, of New York, was one of the principal speakers at the convention. Her appearance discussing a subject, "How Nursing Education Interprets the Philosophy of General Education," which was not racial but general in character, marked the first time a Negro has been so assigned. There are about 200 Negro nurses present.

Sat. 6-12-48

The resolution is an outgrowth of the 1948 biennial meeting when all state groups were notified that in the case of Negro nurses to whom certain southern states associations refuse to grant membership, definite action to achieve this end would be taken in this convention if the states still refused to lift the bars.

According to rules of the national group, only nurses who are members of state organizations could qualify for membership in ANA. That, of course, blocked Negro nurses, except in northern states. It also barred them from jobs which required ANA member-

ANA Votes to Admit South's Negro Nurses

Black 1911 Dispatch

CHICAGO — (ANP) — Negro nurses throughout the country may now be admitted to the American Nurses association, it was voted here by the house of delegates of the ANA last week. The nurses met at the biennial nursing convention held at the Coliseum.

This action lifts the bar on more than 3,000 qualified Negro nurses in the South who are now denied membership because of state bans. In these southern states colored nurses are barred from district associations thus disqualifying them for state and national associations.

Mississippi and Oklahoma recently lifted their racial restrictions. Membership in district and state groups automatically entitled a nurse to membership in the ANA. *Sat. 6-12-48*

The ANA is one of three organizations sponsoring this year's biennial meeting.

Kill Law Barring Nurses From Ass'n

Pittsburgh Courier
From The Courier Chicago Bureau

CHICAGO — The House of Delegates of the American Nurses Association, meeting here last week, passed a resolution during its sessions at the Coliseum which opened membership in the association to more than 3,000 Negro nurses still held to the racial ban.

Membership in ANA is automatic for nurses who are members of district and State associations and the recent ANA action now removes racial bars to membership in those last few states which barred colored members. More than 10,000 nurses attended the biennial sessions here last week. Approximately 200 were Negroes. *Sat. 6-12-48*

One of the highlights of the convention was the appearance of Mrs. Estelle Massey Osborne, New York, as one of the principal speakers during the convention. It was the first time in ANA history that a Negro nurse had addressed the convention.

The resolution last week is the outgrowth of the 1948 biennial meeting when all State groups were notified that in the case of Negro nurses, to whom certain Southern State associations refused membership, definite action to achieve this end would be taken in this convention if those States

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According to rules of the national group, only nurses who are members of state organizations could qualify for membership in ANA. That, of course, blocked Negro nurses, except in northern states. It also barred them from jobs which required ANA membership—just as physicians are barred from certain jobs because of non-membership in AMA or their county associations.

However, all states, except eight, have admitted Negroes. Those eight refused to do so and ANA passed a resolution, over their heads, which admits Negro nurses to the national body regardless of what the states do. Two states, Mississippi and Tennessee, recapitulated and both now admit Negro nurses to membership.

Ohio Girl Among First Graduates At Nursing School

PHOENIX, Ariz.
Four Negro girls, including one from Cleveland, O., among the 21 received word that the Washington hospital had decided to open than 250 beds. St. Monica's Hospital here. This is the first hospital in the U. S. to open a school of nursing with the definite policy of admitting all races.

7-10-48
The students earning diplomas after three years of study include Mildred Jones of Baton Rouge, La., class vice president; Elizabeth Rose Brown of Detroit, Georgia Louise Dickson of New Iberia, La., and Ida Lee Elkins of Cleveland. This class is the second to take complete training at St. Monica's.

7-10-48
On the eve of the graduation exercises, Rev. Emmett McLoughlin, hospital superintendent, learned that the hospital's inter-racial program had been adopted in another section of the country.

7-10-48
St. Luke's Hospital in Spokane, Wash., a non-profit corporation, has been studying the St. Monica's policy for some time. A few days ago, Father McLoughlin received word that the Washington hospital had decided to open an inter-racial school of nursing, after the student body there went on record requesting it.

Hospital Has Interracial Nurse Grads

7-9-48

(Pictures on Page 19)

PHOENIX, Arizona, July 6 — Four Negro girls from widely different parts of the country were among the 21 nurses graduating Thursday, July 1, from St. Monica's Hospital in Phoenix, first hospital in the United States to open a school of Nursing with the definite policy of admitting all races.

The students who earned diplomas after three years of study include Mildred Jones of Baton Rouge, La., class vice president; Elizabeth Rose Brown of Detroit, Mich.; Georgia Louise Dickson of New Iberia, La.; and many tribes.

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an inter-racial school of nursing, after the student body there went on record as requesting it.

7-11-48
"An administrator at St. Luke's informed me the action was taken 'to demonstrate that in no way does anyone attached to St. Luke's condone racial prejudices,'" the Phoenix Franciscan reported. "He said he believed that as long as youngsters have that attitude, there is no need to worry too much about intolerance in the future."

7-11-48
The aim of St. Monica's school, he said, is to provide the best possible nurses' training and experience for young women, who are enrolled on the basis of ability, not ancestry.

7-11-48
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Nurses Prove That Ability—Not Race— Is What Pays Off

7-11-48

(Pictures on Page 19)

PHOENIX, Ariz. — (P) — Ability not ancestry, pays off, graduating nurses of St. Monica's Hospital found out.

7-11-48

The hospital's founding leader and superintendent, the Rev. Emmett McLoughlin, O.F.M., congratulated himself on the success of his inter-racial program. Because of it, Mildred Jones, of Baton Rouge, La., a Negro girl, graduated as class vice president. Acceptance of the policy by this class was proven when Mildred was elected, says Father McLoughlin.

The 21 graduates, four of whom are Negroes, are in the second class of nurses entirely trained at St. Monica's under his guidance.

He claims the hospital was the first to open a school of nursing with a policy of accepting all races and religions. Graduates include Spanish-Americans and Indians of many tribes.

"WE TRY TO IGNORE the racial line during the students' stay here," Father Emmett points out.

Approximately 80 student nurses are enrolled in the training pro-

General

EMPLOY NEGRO NURSES
New York, N.Y.

Cleveland, O.—The Cleveland City hospital now employs two hundred Negro nurses, far more than any other hospital in the city. In contrast, Charity hospital, located in the center of the Negro community, employs only six Negro nurses. *6-20-48*

10,000 Nurses

Daily World

To Convene
Atlanta, Ga.

In Chicago
July 5-18-48

MEMPHIS, Tenn.—(SNS)

To plan for immediate action to meet the critical nursing needs of America, more than 10,000 professional nurses, representing all 48 states, Hawaii and Puerto Rico will convene in Chicago on May 30 for a six-day biennial convention, it was announced today by Katherine J. Densford, president of the American Nurses' Association.

Miss Densford said that "America's Nursing Care--A Professional Challenge and a Public Responsibility" was the theme of the convention.

Sponsored jointly by the ANA, the National Organization for Public Health Nursing, and the National League of Nursing Education, this fifteenth joint biennial convention will tackle, Miss Densford said, "the most critical nursing crisis in American history." *Early World*

The American Nurses' Association, largest of all professional nursing groups, will seek to improve recruitment of nurses by calling for improved economic working conditions, legal control of the nursing profession by the states, and better distribution of nursing service. *Atlanta, Ga.*

Joint meetings will be addressed by General Paul R. Hawley, executive director of the Blue Cross-Blue Shield Plan, Dr. John W. Studebaker, United States Commissioner of Education, Dr. Leonard W. Mayo, President of the National Conference of Social Work, Dr. William C. Menninger, President Elect of American Psychiatric Association and Mrs. Margaret Culkin Banning, writer. *Tues.*

National officers will be elected by the American Nurses' Association. The elections will be held at

the closing session of the convention with 1,588 ANA delegates, each representing 100 members, casting their ballots. The total ANA membership now exceeds 165,000. *5-18-48*

Both the NOPHN and the NLNE will also elect new officers. A large group of Catholic nursing sisters, and approximately 500 lay women, most of them affiliated with the NOPHN, will attend the convention. Some of the nurses attending are members of both the ANA and the NLNE while a small number, chiefly nursing supervisors and teachers, hold memberships in all three groups.

The last meeting was held in 1946 in Atlantic City.

100 HUMAN LIVES LOST DAILY
BECAUSE OF SERIOUS NURSE
SHORTAGE, SAYS NCGN SECRETARY
Dat. 6-5-48

Only 60 Registered Graduate Negro Nurses
For 200,000 Black Populace

STATE MUST TRAIN ITS OWN 'ANGELS
OF MERCY,' CITES MRS. VESSELLS

TULSA.—"Hundreds are dying each day who might have been saved had efficient nursing care and adequate hospital facilities been available . . . At the rate our schools of nursing are graduating nurses today, this country will have a shortage of 200,000 nurses by 1960," Mrs. Alma Vessells, New York City, told a KTUL radio audience last Friday morning in a studio interview during sessions of the southwest regional meeting of the National Association of Negro Graduate Nurses, in session here.

(Additional News On
Woman's Page)

Mrs. Vessells is executive secretary of the national body and last month followed up an

ADVICE ON NURSING CAREER

Times out
New Leaflet Offers Tips to
Negroes on Entering Field
New York, N.Y. 1-17-48

"Your Career in Nursing," a leaflet outlining the opportunities for Negroes in that field, was released this week by the National Association of Colored Graduate Nurses. *Times 1-17-48*

The folder describes qualifications necessary to enter the field, explains how to get training and employment and gives training costs, categories of employment and salary expectations. Negroes comprise 10 per cent of the total American population, the leaflet says, but number less than 3 per cent of the 250,000 graduate nurses. *New York, N.Y.*

Capital for Negro patients with fourteen registered-graduate nurses, followed Mrs. Vessells work at that time. *The Black Doctor*

Practically every state official connected with medical services was contacted during the month in cooperation with the National Association of Colored Graduate Nurses. *Times 1-17-48*

The folder describes qualifications necessary to enter the field, explains how to get training and employment and gives training costs, categories of employment and salary expectations. Negroes comprise 10 per cent of the total American population, the leaflet says, but number less than 3 per cent of the 250,000 graduate nurses. *New York, N.Y.*

The national authority on health and medical facilities, was interviewed by Mr. Oakah L. Jones, prominent white civic worker and member of the board of directors at the Robert Russa Moton hospital of this city.

Statistics quoted during Mrs. Vessells' broadcast reveal that Oklahoma has only 60 registered Negro nurses for the near 200,000 black populace, and all of these are trained outside of the state. Mrs. Vessells said, "this inadequate care contributes to the high Negro rate, which is 3 1/2 times as high as the white maternal rate." Continuing, she said "three times as many Negro babies under one year die in Oklahoma each year and there are three times as many deaths from tuberculosis among Negroes as among white people in Oklahoma."

"These conditions create a problem for all Oklahomans since disease knows no color lines and diseases affecting one group in the community are a hazard to all groups," she continued.

Nurses from several states comprising the southwest region, paused during their three-days session here at the Variety Club, to hear the important radio message of their national executive secretary.

*Chicago, Nurse in
Courses, Sat 2/10/48
Regular Army
Billboard*

WASHINGTON—(ANP) — The second Regular Army appointment

made to a Negro nurse went to First Lieut. Lilamee Dixon, a graduate of Provident Hospital School of Nursing, Chicago, it was learned here last week. *7-10-48*

Florida Nurses Have
Negro Board Member

NEW YORK—(ANP) — Negro nurses in Florida are making rapid strides in gaining recognition by white nursing bodies. According to Miss Alma Vessells, executive secretary of the National Association of Colored Graduate Nurses, the Florida State Nurses Association came up with another first recently by having an elected Negro member participate in its board meeting.

The member was Miss Grace Briggs, president of the Florida Association of Colored Graduate nurses. The Florida group was the first in the south to admit Negro nurses into full membership—that was in 1942. It was followed by Tennessee, Kentucky, Oklahoma, West Virginia, and Mississippi, in 1947.

Miss Vessells participated in the session, which was the 19th annual meeting of the group and held at the Florida A. & M. college clinical association, organized in 1929 by Dr. E. Hunter Lexington, Ky., and the late Dr. J. R. E. Lee. The purpose of the association is to improve services to patients, physicians, dentists, pharmacists and nurses.

DENIED ADMISSION
TO NURSING SCHOOLS
Grease and Grease
BECAUSE OF COLOR

PHILADELPHIA (ANP) — An 18-year-old girl who wants to be a nurse at a time when hospitals, the Red Cross and the armed services and other agencies are begging for nurses this week found herself unable to get into a nursing school in this city because she is a Negro. *Argus*

Miss Pauline Jackson, 18, of Germantown, a graduate of Downingtown Industrial school, is the girl who cannot go to school.

Her rejection came from the Women's Homeopathic hospital, a state institution with a 95 per cent Negro patients roles. Altho Miss Jackson passed the entrance exams to the Temple hospital school, she received a letter from Lelah M. Sitterly, director of the school: *11-1-50*

We regret to inform you that we do not receive Negro students, but we may take this opportunity to inform you that the schools which are listed below accept Negro nurses."

NURSES COMPLETE COURSES IN PSYCHIATRY



May 5-19-48
Nurses appearing above have recently completed short courses of training in psychiatry at the expense of the Veterans Administration as a part of an extensive educational program in VA installations throughout the country. All are nurses at the Veterans Administration hospital Tuskegee, including, left to right, Miss Lula P. Randolph, who took a course at the University of Pittsburgh for two weeks, Cushing General Hospital, Framingham, Mass., for one week and at the Veterans Administration Central Office, Washington, for one week; Miss Olivette A. Mason, Tuskegee's chief nurse, who attended a course at the University of Pittsburgh for two weeks; Miss Blanche H. Jackson, and Miss Fannie V. Williams, each of whom attended the University of Minnesota for three months taking advance work in psychiatry. —(ANP)

Negro Nurses Made Eligible

CHICAGO (AP)—The American Nurses Association voted to allow Negro nurses to join the ANA direct in states where they are barred from state nursing associations.

The action would open ANA membership to an estimated two to three thousand Negro nurses barred from their district and state groups.

The ANA is holding its 36th annual convention here.



May 3-19-48
FIRST NURSING TRAINEE of her race at Michael Reese Hospital, Lurita Moore, daughter of Mr. and Mrs. T. H. Jefferson, 4738 Calumet ave., is shown with four other of the 34 student nurses who recently received caps in traditional candlelight ceremony symbolizing successful completion of first six months of study. Left to right, Imogene Changoy, Ann Janisch, Olga Sokoloff, Miss Moore and Evelyn Sullivan.

Public Health Nurse Activities



This is the staff of the City Hall Nursing Department.

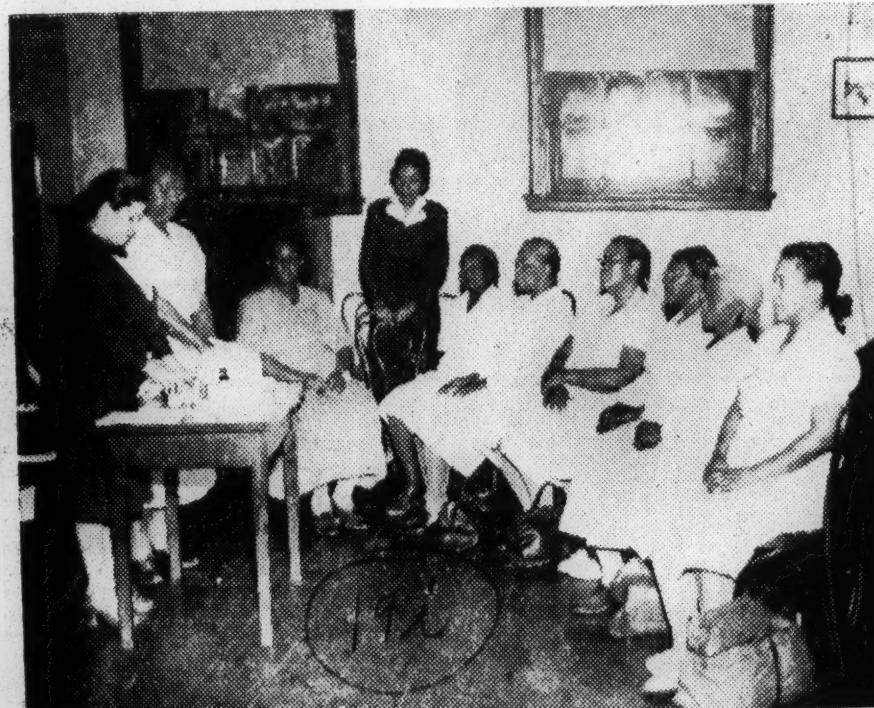


Daily World
Nurses Florence Pyron, Josie Stark and Martha Senior inspect and help Dr. George Morse school physician, with school health examinations at Ashby Street School, Miss Minnefield teacher. *Wed 4-14-48*

Georgia



Daily World
Nurse Geraldine Alexander assists Dr. Douthard with the examination of an infant. *Wed 4-14-48* *Atlanta, Ga.*



Daily World
Nurse Ruby Jackson instructs the midwife in her techniques of delivery. This is a demonstration, care of 70 premature babies. Midwife supervision is one of the duties of the midwife as well as treatment of disease. *4-14-48 Wed*

—O—

Public health nurses in the City Hall unit of the Atlanta Health Department function in a triple job as health teachers and community leaders. They work in the City schools, clinics in the home and dine with parents, teachers, physicians, social and welfare agencies and other groups. Last year they made many thousand visits for expectant mothers, postnatai and infants. They supervised the

Plan Nursing For Education

Daily World *1948*
AUGUSTA, Ga.—Cooperative plans in nursing education have been worked out between Paine College and the University Hospital of Augusta. These plans call for a continuation of the cooperation entered into a few years ago by these two institutions in the training of students in pre-clinical nursing education. In brief, they provide for instruction for one year at the college in courses outlined by the University Hospital authorities. In addition, during the school year 1948-49, there will be boarding arrangements at Paine College for out-of-Augusta young women. *True.*

This latter arrangement will make it possible for young women enrolling for this work who do not live in Augusta to secure the same provisions so far as living arrangements are concerned as regular students at the college. This will give them more time and better opportunity for their course work. Young women accepted for this work who live in Augusta will have the same status at the college as regularly enrolled city students.

Courses for which these young women will be registered during the year are: anatomy and physiology, chemistry, microbiology, sociology, nutrition, English, and physical education. *7-23-48*

Every effort will be made by the college authorities to offer this work to these young women at a very high standard of instruction. The very excellent facilities which the college possesses together with a well prepared faculty should make this possible. This is one way in which Paine College may be of assistance to the University Hospital in helping to improve the work in pre-clinical nursing education.

The number of young women to be admitted to these courses is limited. Admission to this work must be cleared through the office of the Director of Nursing and Nursing Education at the University Hospital. Young women interested in this work should get in touch immediately with Mrs. June Wilson, Director of Nursing and Nursing Education, University Hospital, Augusta, Georgia.

Nurse Associations
Jan 18 1948
Drop Color Bar
J. Jude

By Associated Negro Press

NEW YORK—The all-white state nurses' associations of West Virginia and Mississippi have thrown open their membership ranks to Negro nurses, it was announced here last week by officials of the National Association of Colored Graduate Nurses. This move brings the number of white nursing groups admitting Negro nurses to five.

Tennessee began admitting Negroes early in 1947. It was followed by Oklahoma and Kentucky.

Commenting on the actions of the states in voting to admit all qualified nurses, regardless of color, Mrs. Alida C. Dailey, NACGN's president, said, "Complete integration of the Negro nurse into the affairs of nurses and nursing is becoming a reality with each passing year."

Unfair Treatment, Unjust Dismissals Reported at Grady

Atlanta, Ga.
Pittsburgh, Pa.

(Special to The Pittsburgh Courier)

ATLANTA, Ga.—An investigation of charges of intimidation and unfair treatment of Negro student nurses at Grady Municipal Hospital here may soon be launched by leading citizens of this city, The Courier was informed this week. Dismissals on flimsy pretexts will also be probed, The Courier learned.

In spite of the hardships imposed upon the Negro student nurses by white supervisors, The Courier was also informed that the white directress at Grady will not issue transfers allowing these student nurses to enter other nurse training schools.

SICK NURSE DISMISSED

The case of a student nurse who entered the students' clinic with an illness arising from overwork and an overstrained condition was cited by observers who declared that the young woman was suspended from the hospital only a few days before she was to have completed her training. She had openly declared that students entering the clinic were suspended if they were Negroes.

The white superintendent went into a rage over this declaration, The Courier was informed, and ordered the student nurse to write a letter of apology before she was permitted to return to duty. The nurse had previously complained that pushing beds around the wards was work too heavy for her. She was confined to her room.

After her letter of apology had been read to the student body, the nurse was put in the gynecology ward for eight days and immediately suspended as soon as she was released after treatment.

DISMISSED BY ILLNESS

Another nurse, who became ill just twenty-one days before completing her course, was bluntly dismissed because of her illness, it is said, while a white student nurse having a similar affliction in a more advanced stage, was allowed to continue her training, put on night duty and given special service for her meals. White and Negro nurses have the same superintendent.

Negro girls coming to Grady Hospital are not aware of the conditions which prevail there, observers declare, in urging these prospective stu-

First Class Scheduled To Start Sept. 14; Approval Is Given By Nurse Board

Louisville Defender
Louisville, Ky. (DNB) Special

Red Cross Hospital, Kentucky's only hospital offering exclusive service to Negroes, this week announced that applications are being accepted for Negro nurse training courses.

The announcement, which came in the form of a bulletin, explained that a nurse training school will be opened at Red Cross, beginning Sept 14.

IN LINE WITH BILL

The move is in line with a bill passed in the 1948 State Legislature which made it possible for nurse training to be given Negroes in any institution which offers such training.

The bulletin announcing the opening of the three-year training course pointed out that the school is affiliated with Louisville Municipal College of the University of Louisville and stated that it is approved by the Kentucky State Board of Nursing Examiners. Clinical instruction will be given at Red Cross Hospital as well as Louisville General Hospital, the announcement stated. Both hospitals are fully approved by the American College of Physicians.

REQUIREMENTS LISTED

Requirements for admission to Jim Crow in schools approved for GI training by the state superintendent of public instruction last week disclosed that of 32 institutions given the OK for nurse training, only two announced that they have no racial restrictions. Six did not indicate any type of racial policy, and 24 declared that they accept white only. Negro legislators are planning a bill to withdraw approval.

Preference will be given those

Expose Shows 30 Of 32

Nurse Schools Bar Race

The Chicago Defender expose of the nursing school are as follows:

1. Be at least 18 years of age and not more than 35.
2. Be in good health.
3. Be a graduate of an accredited four-year high school, with 16 credit units, including four units in English.

Negro girls coming to Grady Hospital are not aware of the conditions which prevail there, observers declare, in urging these prospective stu-

Connecticut Nursing Schools Drop Ban

17 Schools Promise To Accept Colored

Atlanta, Ga.
By NNTA News Service

HARTFORD, Conn.—Edward N. Allen, chairman of the Connecticut State Interracial Commission, announced last Thursday that all nursing schools in Connecticut have dropped their ban against racial and religious groups.

Seventeen of Connecticut's nineteen nursing schools have signed pledges to accept students without discrimination, Mr. Allen said, and the two remaining ones will make similar announcements at the next meeting of their nursing councils.

There were five schools of nursing which indicated racial or religious restrictions in 1944, when the Inter-racial Commission began its study of educational opportunities in connection with the nurse shortage, Mr. Allen said.

In 1945, four schools indicated such restrictions although the hospitals conducting two of these schools had hired colored nurses. These schools are now open to all.

The commission said colored nurses increased from two in 1944 to four in 1945, and twelve in 1946. In 1947, the number dropped to six as the cadet nursing program ended. In contrast to the four colored graduate nurses employed by the state in 1944, there are now eleven such nurses employed, the commission said.

Mrs. Alma Vessells, executive secretary of the National Association of Colored Nurses, hailed the announcement of the Connecticut Commission as "a very definite step forward" at a time "when such a step is sorely needed."

She said such announcements tend to make colored women and girls enter the nursing field more readily. Mrs. Vessells said as far as her organization could determine, the announcement by the Connecticut Commission is the most "forth-right" yet to be made by a state in the nursing field and it will and should be an "incentive to other states

whose policies in this matter are not right."

Prior to the war only fourteen of the 1200 nursing schools in the country admitted both white and colored students while 30 admitted colored nurses only, Mrs. Vessells said. Since the close of the war approximately forty schools have been accepting both white and colored nursing students.

The American Hospital Association is trying to recruit 50,000 student nurses in 1948. Connecticut has only 103 registered nurses to attend 8,239 patients and 86 budgeted positions for nurses are vacant in the state.

Doors Open To Colored Members

Atlanta, Ga.
White Nurses In Only Eight States Now Ban

Negro Memberships

Atlanta, Ga.
Staff Correspondence

WILMINGTON, N. C.—By a vote of 52 to 22, members of the North Carolina State Nurses Association provided for membership in the organization of Negro nurses, during its 46th annual session held here last week.

The measure to accept Negro members came after a lengthy discussion pro and con and was placed before the body by Miss Edna L. Heinzerling of Winston-Salem, N. C., president.

The action taken here last week reduces to eight the number of states which have not so far provided membership for Negro nurses.

The move was not a sudden action since it had been considered by the body for some time. Last June during a con-

vention in Greensboro the N. C. charter about a year ago to make it possible for Negroes to gain membership. The charter Association of Registered Nurses, Inc., voted to request admission to the N. C. State in its original form had barred Negroes from membership. She also explained that Negro nurses have been accepted to the American Nurses Association and through them. It was the first formalized action taken by the Negro association. It was the first to accept Negro nurses into the American Nurses Association. Executive Secretary Marie Noell of Raleigh reported that association amended its

SCHOOL OF NURSING FOR NEGROES

The present serious nursing shortage points out the need for a school of Nursing in Oklahoma. Statistics show that the sub-normal health condition of the Negro due to inadequate housing and dieting require greater health facilities, nurses, and doctors.

Exhibit Oklahoma
It is encouraging to note that there are possibilities of developing a school of Nursing for Negroes in Oklahoma. Mrs. Alma Vessel, EXECUTIVE SECRETARY for the association of Negro graduate nurses, states that "The University hospital in Oklahoma City might be an ideal place because the available clinical facilities are excellent. However, she states the number of beds available to the Negro people should be increased to a minimum of 150 to inspire the best clinical practice."

Thu. 5-27-48
Mrs. Vessells is in Tulsa participating in the sessions of the Southwestern Regional Conference of the National Association of Colored Graduate Nurses which is convening at the Variety Health Center, May 27-29th. *Tulsa Okla.*

Tulsans sincerely hope that definite plans will be made in the meeting for Negroes in Oklahoma. The meeting is a timely one and can serve a much needed cause. Tulsans extend a hearty welcome to the nurses in attendance and offer their assistance whenever needed.

STATE QUESTION NUMBER 327

The passage of the recent 15 mill levy in Tulsa made it possible to finance the majority (white) schools on an adequate basis. North Tulsa unanimously voted for the levy. Yet, it must be understood that under the separate school set-up, finances for the operation of separate (Negro) schools do not come from the same fund as do the white schools. This means that the vote for the 15 mills did not directly affect the continuation and adequate financing of separate schools.

In order to properly finance Negro schools, it will be necessary to vote on a separate measure for this purpose. In July, citizens will have the opportunity to do for Negro schools what they did for white schools. The title of the separate school levy is STATE QUESTION NUMBER 327.

The gist of the proposition is as follows: "Shall a Constitution Amendment amending Section 9, Article 10, Oklahoma Constitution, so as to provide that upon certification of the need therefor by the governing board an additional levy of not to exceed one (1) mill on the dollar valuation on any

property within the country shall be made by the County Exercise Board for separate schools for white and Negro children be approved by the people."

The passage of the measure will aid in the (1) building of an adequate high school. (2) help purchase needed equipment. (3) help purchase modern teaching aids to enable children to learn better. (4) repair present building and (5) funds for maintenance. *Thu. 5-27-48*

The term separate schools applies in some countries to white as well as Negro schools. In some counties, Negro schools are majority schools because there are more Negroes in school in that area than whites. In this case, white schools are called separate schools. Nevertheless, in Tulsa, Negro schools are called separate schools because they are the minority population.

So in reality the proposed measure will aid both white and Negro schools in the counties where separate schools are either white or Negro. Governor Roy J. Turner is supporting this question 327, together with Negro and white citizens throughout the state. Some of the most powerful newspapers in the state area coming out in favor of the bill. It is encouraging to note that such a sentiment is indicative of the fact that the good people of Oklahoma are desirous of providing equal facilities for both Negro and white schools. State Question 327 will aid in bringing about that realization. *Thu. 5-27-48*

When the measure comes up, citizens are urged to vote (YES) for State Question 327 so that all of the schools of Oklahoma can be operated successfully for the development of well-trained boys and girls.

Two Toledo Hospitals Drop Bars In Training Nurse Applicants

Sal. 7-13-48

TOLEDO
Two Toledo hospitals have dropped bars against Negro applicants for nurse training and another has agreed to do likewise if the Toledo Medical Academy will approve.

Felix Gentile, executive secretary of the Board of Community Relations, disclosed this to City Council, in his third quarterly report last week.

The hospital that will admit prospective Negro nurses for training are Mercy and St. Vincent, Catholic institutions. Rohrinson Hospital, a Lutheran institution, has tentatively said it would follow suit.

Holdout hospitals are River-side, Toledo, Flower and Maumee Valley, the latter operated by Lucas County.

The Board of Community Relations has been working on the problem for months. However, it was actually initiated as a project of the industrial relations department of Frederick Douglass Center last year. John Perdue, secretary of the department, now disbanded, laid most of the ground work.

In other accomplishments of the city agency, Gentile listed hiring of Negro cab drivers by Red Cab Co., settlement of the Nebraska Ave. bus dispute, and integration of Negro veterans in temporary housing projects without incidents.

However, he admitted that the board is soft pedaling, for the time being, efforts to integrate further Negroes in various Toledo industries. He blamed this delay on internal adjustments of the industries.

Two Youngstown, O., young women of color have been admitted for training in St. Elizabeths' hospital, a Catholic institution. Misses Luyinda Mahoney and Leona Green have taken up residence in the nurses' school. These were the first colored students ever to train in a white hospital in Youngstown.

191 1948

Nursing (North Carolina College)

To Star Public Health
Nursing Course

DURHAM, N. C. (ANP) — A program in public-health nursing has been established at the North Carolina college here, and students will be admitted beginning with the fall term in September, according to an announcement by Miss Esther P. Henry, director of the department.

Miss Henry stated that this one-year program of study with the major course being public health nursing is designed to prepare students to carry on the functions of this field, and is based on the satisfactory completion of an approved curriculum including at least three months of supervised field practice. Miss Henry stated further that although a curriculum of study has been outlined, it is possible to arrange a program on an individual basis with consideration for the student's educational and experimental background. *Fr. 5-21-48*

In order to be eligible for admission to the department of public health nursing, the applicant must be a registered nurse, a graduate of an approved high school, and a graduate of a school of nursing approved by the committee on admissions.

N. C. College Opens
Public Health Nursing
Program

DURHAM, N. C.—A program in public health nursing has been established at the North Carolina College here, and students will be admitted beginning with the fall term in September, according to an announcement by Miss Esther P. Henry, director of the department. *5-21-48*

19i 1948

Public Health



HEALTH SERVICE FOR PUBLIC
— These are your Public Health
Nurses working out of the W. Side
Health Center. Seen in the picture
are Mrs. Lula Ellington, R. N., Mrs.
Ola Frederick, R. N.; back row Mrs
Edna Ward, R. N., and Miss Pearl
German, R. N.

Opens First Washington Heights Apothecary

The Age New York, N.Y.



HONORED — Dr. Allison Davis, first Negro full status faculty member in a Northern ~~university~~, will give the Inglis Memorial lecture at Harvard. He's better last week by opening the first apothecary in the Wash. of Chicago. *1-17-48*

Mathieu V. Boute, pharmacist, who made history back in 1920 when he established one of the first complete pharmaceutical stores in Harlem, did himself one better last week by opening the a teacher at the University *1-17-48* first apothecary in the Wash. of Chicago. *1-17-48*
ington Heights area at 1028 St. *1-17-48* avenue. His makes the second Negro owned complete apothecary specializing in the filling of doctors' prescriptions exclusively and the third such store in the entire City of New York. *1-17-48*

Dr. Boute is a graduate of the University of Illinois, taught chemistry at Meharry Medical College for three years and recently was in charge of the prescription department of Leggett's 17th street store. Photographed with him was his first customer, Mrs. Elsie Taylor, owner of Elsie's Dining Room.

(De Mille Photo).

19k 1948

American Academy of Dermatology

~~Chicago Physician~~
~~Journal + Guide~~
~~Elected To Academy~~
~~May 1948~~

CHICAGO — (ANP) — Dr. Paul Boswell has been elected a member of the American Academy of Dermatology, a distinction which has been conferred on only two other Negro physicians.

Dr. Boswell, an associate of the noted Dr. T. K. Lawless, is a graduate of the University of Minnesota medical school, served his internship and residency at Provident Hospital here. He is serving on the faculty of the University of Illinois medical school. *1-17-48*

19K 1948

19K American College of Physicians

BY MATTIE B. ROWE

Dr. Gerald A. Spencer, Harlem physician and authority in dermatology and syphilis, was named to associate membership in the American College of Physicians. He becomes the second Negro to have been admitted, the first being the late Dr. Algernon B. Jackson, of Philadelphia. 19K 1-4-48

Dr. Spencer received his bachelor's degree from City College in New York, and completed his medical studies at the University of Lyons, France.

Dr. Spencer is currently serving at Harlem and Sydenham Hospital as dermatologist and syphilologist, and assistant physician in charge of social hygiene for the New York City Health Department.

He holds fellowship in the Academy of Medicine, Royal Tropical Society, London; and is a diplomate of the American Board of Dermatology and Syphilology.

Medical Group

Accepts First

19K Negro

Southern Negro

Second Medic Named to Honorary Group

Baltimore, Md.

NEW YORK — (ANP) — Dr. Garfield A. Spencer, eminent Harlem physician and recognized authority in the fields of dermatology and syphilis, was named to associate membership in the American College of Physicians her last week after a three year wait for the medical group to act upon his application for admittance. Sat.

As an associate member, he becomes the second doctor of his race to have been admitted, the first being the late Dr. Algernon B. Jackson, Philadelphia. 1-3-48

A native of Castries, St. Lucia, British West Indies, Dr. Spencer has lived in the United States since 1921. He earned a bachelor's degree at City College here, and completed his medical studies at the University of Lyons, France, through a special fund created by several of the professors at City College.

Medical Group

Honors Detroit

DETROIT — Dr. A. B. Henderson, 36, of 652 Arden Park, was recently inducted as an associate in the American College of Physicians. He is the first Negro physician from this area to be so honored. 19K

WASHINGTON — Dr. John B. Johnson, of Howard U. School of Medicine, has been elected an associate in the American College of Physicians.

His election marks the first time a Negro physician below the Mason Dixon line has been admitted to that organization. He is the first member of the staffs of Howard and Freedmen's Hospital to become a member. Sat.

Dr. Johnson was born in Bessemer, Ala., 1908, and received degrees from Oberlin College and Western Reserve University.

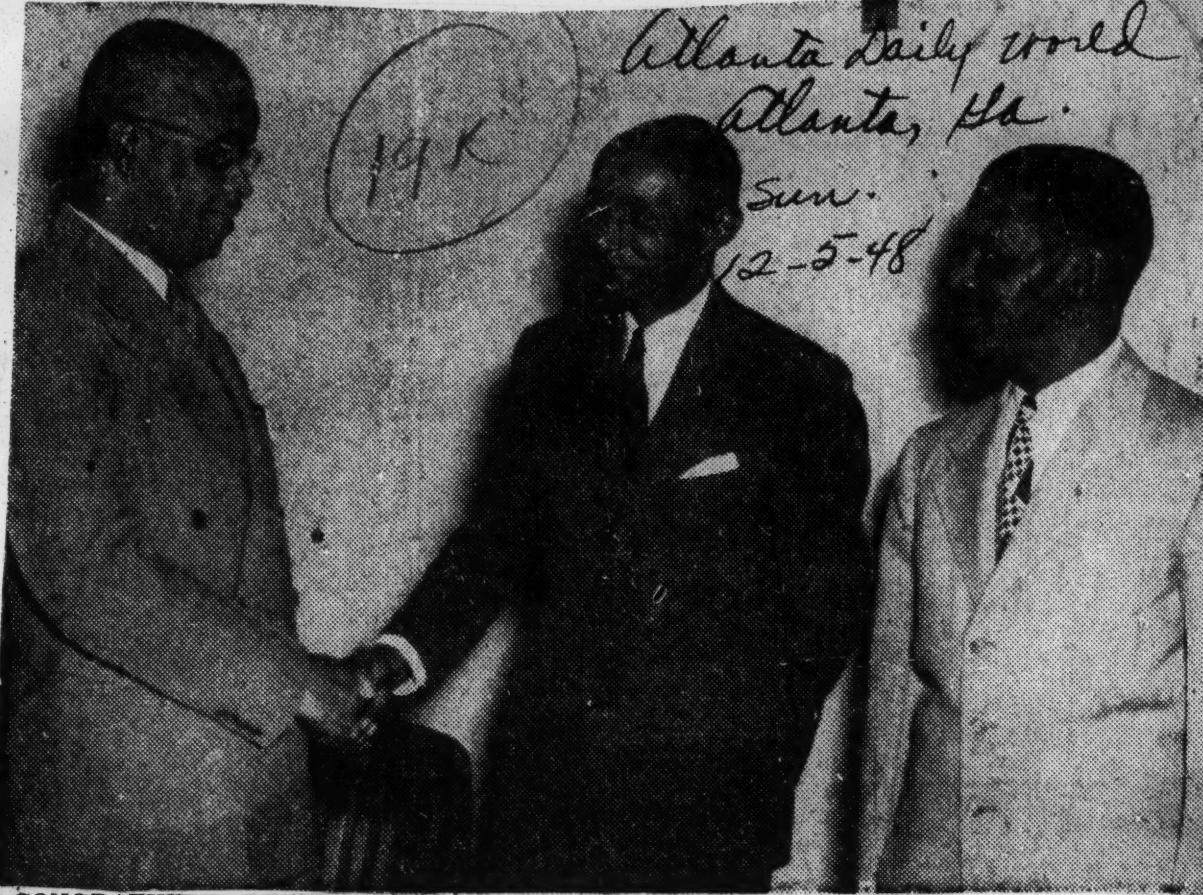
fellow in the ACP after he has completed his three to five year term as an associate.



HONORED: Dr. John B. Johnson, associate professor of internal medicine, Howard University, the first Negro south of the Mason and Dixon line to be elected to the American College of Physicians. He is a specialist in heart disease.

Graduate of Meharry Medical College, Dr. Henderson gained prominence in the field of internal medicine and is a member of Detroit's only inter-racial medical organization. He is an army veteran, having served in Liberia.

Before establishing practice here, he served his internship in the Cleveland City hospital. Dr. Henderson will become a full



CONGRATULATES FELLOW — DR. T. T. TILDON, manager of the Tuskegee VA Hospital, is shown above congratulating Dr. L. A. Mahone, one of 11 distinguished Negro surgeons recently named as Fellows of the American College of Surgeons, one of the highest honors a surgeon can receive. Looking on is Dr. H. F. Davis, the only Negro physician in the country who has been certified by the American Board of Physical Medicine. Both Drs. Davis and Mahone have been stationed at the Tuskegee VA hospital for many years.

Three Surgeons Get America's Highest Honors

By Associated Negro Press

BALTIMORE, Md. — Three members of the surgical staff of Provident Hospital here are being admitted to the American College of Surgeons at its annual convention in Los Angeles, Oct. 19-22. *1948*

Those receiving this honor, the highest a surgeon can earn in America, were Dr. Robert L. Jackson, chief of staff at Provident; Dr. I. Bradshaw Higgins and Dr. Henry C. Welcome. They bring the total to 18 Negroes admitted to this group since 1945.

Supt. J. L. Procope of Provident Hospital said, "The hospital is justly proud of the accomplishments of these members of its staff, who are going into this very select group of the nation's outstanding surgeons."

Until 1945, the racial bars of the American College of Surgeons were held rigidly against Negro doctors, despite their qualifications. Only Dr. Daniel Hale Williams of Chicago had been admitted from 1913 to 1934.

He is a member of the Monumental City Medical Society and the Maryland State Medical Association. *Oct. 10-23-48*

Dr. Higgins took his pre-medical work in English schools, and graduated magna cum laude from Meharry in 1928.

While serving his internship at Hubbard Hospital he was an assistant laboratory instructor in bacteriology and pathology at Meharry.

He came to Provident in 1925 where he served as an associate resident in medicine until 1930 and resident in surgery until 1934. He is now a visiting surgeon. His post graduate work includes courses at Peter Bent Brigham Hospital in Boston, Columbia University and New York Postgraduate hospitals.

As an active leader in community and civic life, Dr. Higgins is president of the Maryland Medical Association, a member of the Governor's Commission on Race relations and a member of the board of the Citizen's Housing and Planning Associa-

In 1945 the group broke down the racial bar by admitting Dr. Louis T. Wright of New York. Since then 15 fellows have been taken in.

The Provident Hospital surgeons are the first colored doctors from Maryland to be accepted. All three are graduates of Meharry Medical College.

Dr. Jackson graduated from Meharry in 1921, interned at Millie Hale Hospital in Nashville, 1921-22, and has taken post graduate courses at the Cook County Graduate School, Chicago, and New York Post Graduate School of Medicine.

He came to Provident in 1825 after serving with the Maryland Tuberculosis Association, 1923-25. At Provident he served as assistant resident, resident and visiting surgeon. In 1942 he became chief of staff of the hospital.

He is a member of the Baltimore Planning Commission. He is also a member of the Kappa Alpha Psi Fraternity, the Masons and the Elks.

Dr. Welcome is the surgical clinician in the cancer detection center of Provident and also a visiting surgeon. He has also taught at the Provident School of Nursing.

Dr. Brooks Named Member of American College of Surgeons

CHICAGO. — (AP) — Dr. Roosevelt Brooks, senior attending surgeon at Provident hospital, was notified here last week that he has become the fifth Negro surgeon from Chicago to be admitted to the American College of Surgeons in the last five years. Dr. Brooks will be formally inducted into the college on Oct. 22 when it meets in the Baltimore hotel, Los Angeles.

One of Chicago's leading ophthalmologists, Dr. Brooks is a graduate of the University of Illinois college of medicine, where he is also an instructor in ophthalmology. In addition he is certified by the American Board of ophthalmology, and is a member of the Chicago Ophthalmological and International Congress of ophthalmology.

The American College of Surgeons was organized in 1913 and is composed of the leading surgeons in both the U. S. and Canada. The late Dr. Dan Williams was a charter member, but no other Negroes were admitted until recently.

Surgeons' College Inducts 11 Negroes

Oct. 10-30-48
See Page 2
LOS ANGELES.—The American College of Surgeons honored eleven outstanding Negro doctors with memberships in its thirty-fourth clinical congress at the Biltmore Hotel here recently.

The surgeons who were inducted are Drs. Robert Wilkinson, Jesse Green, George Thorne and James Wilson, all of New York; Albert Jackson, H. Welcome and H. Higgins of Baltimore; William A. Finkler and Henry Hampton of St. Louis; Roosevelt Brooks of Chicago, and J. A. Mahone of Tuskegee, Ala.

GIVEN BANQUET

The new members of the select surgeons society were honored at a banquet given by the Southern California Medical, Dental and Pharmaceutical group.

Among the 5,000 surgeons attending from all parts of the United States and Canada were thirty Negro delegates.

Membership in this exclusive medical society is considered one of the highest honors which can be accorded to an American surgeon. *Oct. 10-30-48*

Induction ceremonies for the new members were held in the spacious Philharmonic Auditorium.

The eleven new inductees represented the largest number of Negro doctors yet honored.

The prominent visiting Negro physicians were housed in Los Angeles' leading hotels, with no evidence of discrimination occurring.

3 Doctors Admitted to American College

BALTIMORE. — Three physicians of the staff of Provident Hospital here will be admitted this month into the American College of Surgeons, an organization of prominent surgeons in the United States and Canada.

The are Drs. Robert L. Jackson, chief of staff; I. Bradshaw Higgins and Henry C. Welcome, both of the surgical staff.

19k 1948

Dr. John H. Graves

Dr. Graves To
Teach At Mercy

PHILADELPHIA (NNPA) — Dr. John H. Graves, selected as a surgical resident at Philadelphia General Hospital by a committee of internes and residents of the hospital, will be qualified to go to Mercy Hospital as a teacher in surgery following his residency. *1-3-48*

Dr. Graves, who served as medical director of Mercy Hospital for four years, is the first colored surgeon to be chosen for the position. *act*

His appointment was announced last Monday by Dr. Rufus S. Reeves, Director of Public Health. Dr. Graves, is a graduate of Villanova College and of Howard University Medical School. His offices are at 2009 Fitzwater Street.

Dr. Lawlah Honored By Medical Group

1948 Daily Herald
Atlanta, Ga.
WASHINGTON, D. C. — (SNS)
— Dr. John W. Lawlah, Clinical Professor of Radiology at the Howard University College of Medicine, was awarded the Degree of Fellowship by the American College of Radiology at its annual convention in Chicago on June 20th. *Tele.*

Dr. Lawlah who has been a member of the College for seven years, was advanced to the degree of fellowship because of outstanding contributions and service to radiology. *6-22-48*

Dr. Lawlah's advancement is a distince achievement and honor, in that he is the third Negro physician to be elected to full fellowship in the 25-year history of the American College of Radiology.

China (Both Sides) Is Very Grateful to Dr. Jerome Peterson

(Special to The Courier)

NEW YORK — The warring Communist provinces and the Chiang Kai-shek Government in China have one thing in common, despite the increasing seriousness of the conflict. That is Dr. Jerome Peterson who is commuting between this country and China, running out disease in a nation where 10,000,000 natives are dying each year of maladies that could be prevented or controlled.

Public health officer of the United Nations, Dr. Peterson is presently in Brooklyn's Red Hook section, teaching aspiring physicians how to prevent diseases. As the new acting executive officer of Long Island College of Medicine's department of preventive medicine and community health, he was chosen for the post because he was familiar with the people and the social services available to them in the waterfront district. *Sat. 12-11-48*

MAY GO OVER AGAIN

On leave from the World Health Organization, for which he has just made the latest of two one-year missions to China, Dr. Peterson may be sent to some other plague center, depending on how much money is allotted the program by the UN. *Sat. 12-11-48*

As a lieutenant colonel, Dr. Peterson headed a mission to China in 1946 as medical officer of the United Nations Relief and Rehabilitation. Returning in April last year, he said ten years of war had left China's defenses against disease greatly impaired.

FULL COOPERATION

Within four months he went back to China as epidemiologist with a thirty-two-man mission from the World Health Organization. He said that both the Communist and Chiang Kai-shek factions cooperated with the medical mission to the best of their ability, and that Chinese doctors and medical students worked valiantly with woefully inadequate facilities.

"There is so much still to be done if we are to help the Chinese conquer the great killer plagues," Dr. Peterson said. "Nowhere is the disease danger far below the surface."

STARTED AS CHEMIST

During his college years, the 45-year-old physician was not too interested in medicine. He studied chemistry in Syracuse University and went to work for a cleanser manufacturer. He took his medical degree in Columbia University in 1931. *Sat. 12-11-48*

His work in tuberculosis in Harlem and Sea View Hospitals led to an appointment as medical director at anti-tuberculosis hospitals in Puerto Rico where he spent several years and became epidemiologist of the San Juan Department of Health, attached to the Research and Training School of Tropical Medicine. This work stood

him in good stead later when he fought cholera, bubonic plague, black fever and other epidemics in China.



DR. JEROME PETERSON

leads fight on plagues in China

Jerome Peterson, on Leave as Director of College's Prevention Medicine, Has Had Lively Career on Two Continents

Asked last month to serve until February, when a permanent appointment will be made, in the entific career developing a better medical college position left vacant by Dr. Thomas D. Dublin, who had resigned to become executive director of the National Health Council. *Sat. 12-11-48*

Jerome Peterson began his scientific career developing a better scouring powder for housewives and worked up to chasing plagues in China as a public health officer of the United Nations. Dr. Peterson was asked to take over because he had worked, between his missions abroad, with Dr. Dublin in developing the training program at Long Island College of Medicine, where he was assistant professor. He also was now in Brooklyn's Red Hook district, instilling in prospective physicians the social aspects of preventive medicine.

On leave from the World Health Organization, for which he made the latest of two one-year missions to China, Dr. Peterson does not know when he may be sent off again to Foochow, Canton or plague centers in other parts of the world. That may depend on how much money the organization gets from United Nations member nations to continue its program.

Only a few weeks after his return from China, Dr. Peterson was

facilities are available to them." The fourth year students at the college put in time at the local health center, at X-ray and cancer detection clinics, and at mental hygiene clinics. They accompany visiting nurses to homes, study health facilities in public housing projects, and acquaint themselves with the Margaret Sanger bureau for planned parenthood.

Dr. Peterson, also has his students familiarize themselves with the facilities offered by services such as the Health Insurance Plan, the Consolidated Edison Company's medical service, and the Union Health Center, which provides medical care for 150,000 members of the International Ladies Garment Workers Union. Dr. Peterson's wife, Dr. Vera A. Joseph, is assistant medical director of the Union Health Center.

Lean and youthful-looking for his 45 years, Dr. Peterson told with evident relish how the elevator operator at the college tried to bar him from the car because students were supposed to walk down from the second floor.

Dr. Peterson felt no urge toward medicine in his college years. He studied chemistry at Syracuse University and went to work for a cleanser manufacturer. When he turned to medicine he never forgot the importance of cleanliness in fighting the spread of epidemics. Dr. Peterson took his medical degree at Columbia University in 1931.

His work in tuberculosis at Harlem and Sea View Hospitals led to his appointment as medical director at anti-tuberculosis hospitals in Puerto Rico, where he spent several years and became epidemiologist of the San Juan Department of Health, attached to the Research and Training School of Tropical Medicine. This work stood him in good stead later when he fought cholera, bubonic plague, black fever and other epidemics in China.

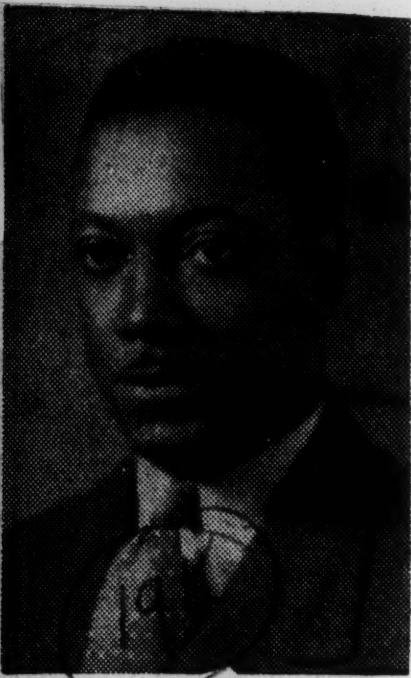
Returning to New York in 1942, Dr. Peterson became the second Negro health officer in the city's Department of Health. He was appointed district health officer at the Central Harlem Health Center. He was also the second Negro to be commissioned in the United States Public Health Service.

A lieutenant colonel, he headed the mission to China in 1946 as medical officer of the United Nations Relief and Rehabilitation. Returning in April last year, he said ten years of war had left China's defenses against disease so impaired that 10,000,000 Chinese were dying each year of maladies that could be prevented or controlled. Within four months he went back to China, as epidemiologist with a thirty-two-man mission from the World Health Organization.

Dr. Peterson traveled through large areas of China, both in the territory controlled by the Chiang Kai-shek Government and in the Communist provinces. He said that both factions cooperated with the medical mission to the best of their ability, and that Chinese doctors and medical students worked valiantly with woefully inadequate facilities.

The mission fulfilled its immediate triple aim in making supervision, advice and teaching of World Health Organization medical experts available in far-flung areas of China, selecting candidates for fellowships in post-graduate medical education, and replenishing medical libraries depleted in the war.

Mon 11-22-48
"There is so much still to be done if we are to help the Chinese conquer the great killer plagues," Dr. Peterson said. "Nowhere is the disease danger far below the surface."



mencement on June 4th. *Mrs.*

6-17-48

Dr. Brown is a product of Beach-Cuyler High School where he finished as Valedictorian of his class. He first entered upon his higher studies at Tuskegee Institute where he was awarded a certificate in building construction. His principal college work, however, was done at Morehouse College where he matriculated just prior to entering profession school.

Dr. Brown is the son of Mr. and Mrs. Samuel J. Brown of East Anderson St. *6-17-48*

Queen of Angels hospital extends facilities to Negro

6-17-48
Dr. Thomas Roy Peyton, recently elected president of the Southern California Medical, Dental and Pharmaceutical association, has been made a member of the courtesy staff of the Queen of Angels hospital, it was announced today.

First local private hospital to extend this courtesy to a Negro, the Catholic hospital has granted Dr. Peyton the privileges of operating or otherwise treating his patients at the hospital, and of joining staff discussions. The physician is a specialist in rectal diseases. *6-17-48*

Recently installed as president of local doctors, dentists and pharmacists, Dr. Peyton is assisted by the following: Dr. H. Claude Hudson, vice president; E. Tennyson Giddings, pharmacist, secretary; Marvin Jackson, pharmacist, corresponding secretary; and Dr. Curtis Carr, treasurer.

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6-17-48
DOUBLE HONORS recently came to Dr. Thomas Roy Peyton who is a specialist in rectal diseases with office located at 2068 South Hobart Boulevard. The first was the acceptance of Dr. Peyton as a member of the courtesy staff of the Queen Of Angels Hospital, marking the first time a Negro doctor has been accorded full medical and surgical privileges in a private Hospital. Queen of Angeles is a Catholic hospital and in granting Dr. Peyton courtesy privileges, it has set a new mark in inter-racial progress. The second of Dr. Peyton's honors was his election of the presidency of the Southern California Medical, Dental and Pharmaceutical Association. He plans to direct the organizations program toward better race relations. Other officers serving with him are: Dr. Claude Hudson, vice pres.; E. Tennyson Giddings, Pr. D. secretary; Marvin Jackson, Ph.D. corresponding secretary; and Dr. Curtis Carr, treasurer.

Samuel J. Brown Graduates In Dentistry

6-17-48
Samuel J. Brown, Jr. has completed the course in the School of Dentistry at Howard University and received the degree of DDS at its Eightieth Annual Com-

Patients, Medics Laud First

Trainee at Ky. Hospital

LOUISVILLE, Ky. (AP)—Last summer, General Hospital opened its doors to the first colored physician for training in anesthesiology, and to date both patients and doctors are satisfied that the trainee, Dr. Maurice F. Rabb, 40, knows his business.

Dr. Rabb has practiced medicine in Shelbyville and here for 18 years. Since early summer, he has held a part-time residency in anesthesiology. He receives his training without cost and in return gives his services in the operating room without pay.

A member of the Red Cross hospital staff, he said the need existed for better anesthetics at the hospital. He was frequently called upon by colored surgeons to give anesthesia to their patients. Since he had no formal training, he began to read books and ask questions about it of other physicians.

Meharry Graduate

Charles G. Tachau, member of the Red Cross's board, learned of his interest and succeeded in getting Dr. John W. Moore, dean of the medical school, to put Dr. Rabb in training for that field at General Hospital.

Dr. Rabb, born in Columbus, Miss., is a graduate of Fisk University and Meharry Medical School. He interned at Kansas City General Hospital and began practicing in 1930. His brother, Louis A. Rabb, is business manager of John A. Andrews Hospital, Tuskegee, Ala.

Fond of His Work

Although Dr. Rabb is maintaining his private practice, he devotes half of the hours of the day to his training at the hospital. Sometimes he is on duty all night.

He began his work with the operating-room staff five months ago, and Dr. Milton Davis Jr., who is in charge of the department, is pleased with his work.

Dr. Rabb says he has learned a lot since his training began at General Hospital and feels there is still more to be learned. He believes he is fortunate to have an opportunity to work with Dr. Davis.

All members of the staff, whether they are from the North or the South, have accepted him "in friendly spirit," Dr. Rabb says, and he has been in close touch with medical students since September.

Physician, 40, Is On Staff At Red Cross

By FRED MINSHALL

For the first time, a Negro is training at General Hospital.

He is Dr. Maurice F. Rabb, 40, who has practiced medicine in Shelbyville and Louisville for 18 years.

Since early summer he has held a part-time residency in anesthesiology at General. There he receives training without cost and in return gives his services in the operating room without pay.

Although Dr. Rabb is maintaining his private practice, he devotes half of the hours of the day to his training at the hospital. Sometimes, he is on duty all night.

Teacher, Pupil Are Pleased.

Five months after Dr. Rabb began his association with the operating-room staff, both he and the doctor in charge of the department, Dr. Milton Davis, Jr., are pleased with the way things are working out.

Here's what Dr. Rabb says:

"I have learned a lot since I have been here and have found there is still more to be learned.

"I feel I have been fortunate to have found Dr. Davis. The work might have been much harder with someone else. He has given me every aid.

Accepted By Staff.

"However, all members of the staff have accepted me in friendly spirit, whether they were from the North or the South. I have had close contact also with the Medical College students since they started a new term in September and they, likewise, have taken me in.

"The patients have been quite friendly. I have given anesthesia to some white patients and when I have visited them the following morning they have always greeted me with a smile."

Dr. Davis, who is associate professor of anesthesiology at the University of Louisville Medical

First Negro to Train At General Hospital Here Is Accepted By White Patients and Doctors

School as well as director of anesthetics at the hospital, adds:

"Dr. Rabb has made splendid progress because he is absorbed in his work. Not only is he eager to learn, but he has proved to be an apt student."

C. G. Tachau Gave Aid.

How did Dr. Rabb become the first member of his race to study at General Hospital?

This, he will tell you, arose from the need for better anesthetics at Red Cross Hospital, where he is a member of the staff.

There, Dr. Rabb was called upon by Negro surgeons to give anesthesia to their patients. Since he had no formal training in that field he began to read books and ask questions about it of other physicians.

His interest came to the attention of Charles G. Tachau, member of the Red Cross Hospital's board. Tachau conferred with Dr. John Walker Moore, dean of the Medical School, on the possibility of having Dr. Rabb train in anesthesiology at General Hospital. Dr. Moore agreed and asked Dr. Davis to arrange the training.

Is Mississippian.

Dr. Rabb was born in Columbus, Miss., where as a child he decided to become a doctor. This ambition, he said, was strengthened by his friendship for a Negro doctor in Columbus, Dr. T. V. James.

Dr. Rabb attended Fisk University and Meharry Medical School in Nashville. His father had a grocery store and was able to educate six sons, but Dr. Rabb helped out with his expenses by working during the summer as a waiter on Pullmans of the Northwestern Pacific running between St. Paul and Seattle.

After interning at Kansas City General Hospital, Dr. Rabb began practicing in 1930 at Shelbyville where he remained until 1946 when he came to Louisville.

Serves At Health Center.

Here, he has charge of venereal-disease diagnostics at the

Central Louisville Health Center of the City-County Health Board. Among other duties, he conducts a child-health conference for the Health Board. He is school physician for Lincoln Institute near

Shelbyville.

He was chairman of a committee on health for the Commission on Negro Affairs appointed several years ago by former Governor Simeon Willis.

Dr. Rabb, who lives at 921 W. Chestnut and has an office at 923 W. Chestnut, is married and has a son. His wife, Mrs. Jewel M. Rabb, teaches English in Central High School.

Brother Manages Hospital.

His 16-year-old son, Maurice Rabb, Jr., is one of the Louisville Boy Scouts who attended the International Scout Jamboree at Moisson, France, last summer.

A brother of Dr. Rabb, Louis A. Rabb, studied hospital administration at Northwestern University and now is business manager of John A. Andrews Hospital, Tuskegee, Ala.

Dr. Rabb's sponsor in his training at General Hospital, Dr. Davis, is a native of Midway, Ky. He trained at the Medical School here and studied anesthesiology at the University of Wisconsin Medical School.

Louisville Hospital Is Training a Negro

Doctor With 16 Years of Practice Is a Resident

LOUISVILLE, Ky., Nov. 18 (P)—Louisville General Hospital officials revealed today that a Negro physician is taking training for the first time in the hospital's history.

Dr. Maurice F. Rabb, forty, is a staff member of Red Cross Hospital for Negroes here but had no opportunity there to study professional use of anesthetics. General Hospital therefore admitted him as a part-time resident.

Dr. Rabb is a native of Columbus, Miss., and practiced in Shelbyville, Ky., for sixteen years, coming to Louisville two years ago.

19k 1948

Dr. Edward M. Sewell

Philly Hospital
Has First Negro
Resident Medic
Date 7-10-48

PHILADELPHIA—Dr. Edward M. Sewell, 25, became the first Negro resident physician at Children's hospital, Thursday after completing his internship at Harlem hospital in New York City.

An honor graduate from the University of Pennsylvania last year, Dr. Sewell won top honors for seniors in the pediatrics course there. 7-10-48

Dr. Tann, Detroit Physician Gets 12 1/2-25-Yr. Sentence

DETROIT, Okla. (UPI) — Sat. 3/3/48 By ISAAC JONES

DETROIT — The case of Dr. Henslee E. Tann, 39, came to a dramatic ending in Judge Paul E. Krause's Court today when the "often-time-jailed" physician was sentenced to 2 1/2 to 25 years in Jackson (Mich.) prison by Judge Paul E. Krause.

Dr. Tann, who was at liberty on bond with two illegal operation charges against him, was arrested last month on the complaint of a 25-year-old unmarried Canadian woman who charged that she was criminally attacked by Dr. Tann when she visited him to discuss an operation.

~~Forgot About Profession~~

The physician was found guilty by a jury on Feb. 18. In passing the sentence, Judge Krause noted that Dr. Tann had been acquitted twice on charges growing out of illegal operations.

"Unfortunately for himself, he became primarily interested in money and not in service as a physician," the judge added.

Dr. Tann, who has been married three times, is under a year's sentence in Detroit House of Correction for failure to pay alimony.

Judge Krause also pointed out that Dr. Tann "accused two police of taking money from him in another case. Later he admitted this was solely to get an adjournment."

~~Made \$48,000 Illegally in '46~~

The Court disclosed that Dr. Tann confessed that he made \$48,000 in 1946 largely through abortions and other illegal operations.

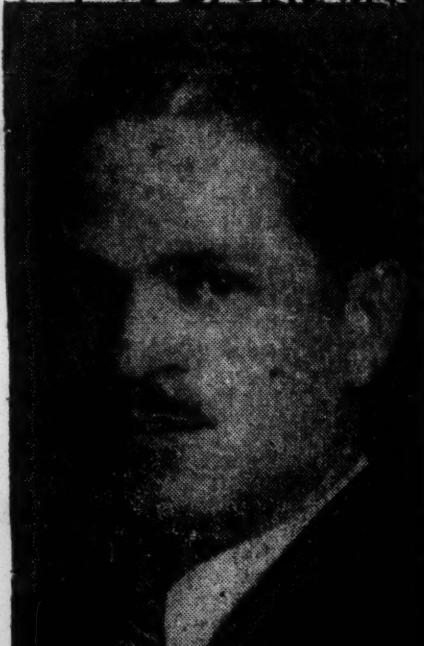
At the same time the physician had his regular practice, was on the staff of the Receiving Hospital and was a special compensation physician for the Department of Public Works of the City of Detroit. The latter position alone netted Tann up to \$4,000 annually according to reports.

Dr. Tann pleaded with the court for leniency, saying, "I am a broke man. I owe \$8,000 in income taxes to the Government, besides alimony and numerous personal debts."

Oklahoma Medical, Dental and Pharmaceutical Assn.

Names President for '48-'49

Tulsa, Okla. (UPI) —



Thurs. 5-20-48

Dr. J. Houston Burt, physician and surgeon of Tulsa, Okla., is the newly elected president of the Oklahoma Medical, Dental and Pharmaceutical Association. Dr. Burt received his B. S. degree from Howard University, Washington, D.C., his Doctor of Medicine from Meharry Medical College, Nashville, Tenn., and completed the course in Orthopedic Surgery at the State University of Iowa. He is one of the few Negro physicians in the United States who has completed the course in bone and joint Surgery. Dr. Burt considers it an honor and privilege to serve the Medical Association this year. It is a credit to the Association and Tulsa to have such a physician able to give service. Dr. Burt states that he is expecting the fullest cooperation from all of the members for this year.

The next meeting will convene in Muskogee, Oklahoma during May of 1949. The officers for this year include Dr. R. C. Bryant, President-Elect, Dr. Maurice B. Moore, Executive Sec., and Dr. W. S. Boyd, Treasurer.

Two Abortion Indictments Against Dr. Brown Dropped

District Court Judge Richmond B. Keech yesterday dismissed two indictments for performing abortions against Dr. Schley Brown at the request of Assistant United States Attorney Arthur McLaughlin.

"Present juries," McLaughlin said, "seem reluctant to convict on abortions, and we do not have sufficient evidence to make these cases airtight."

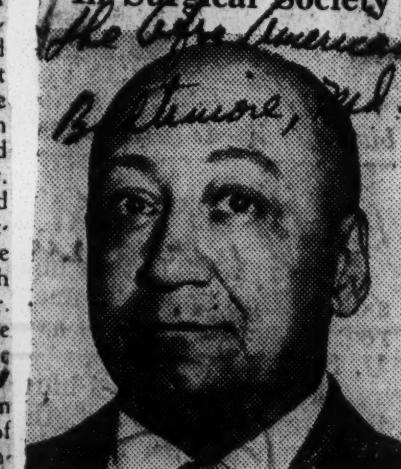
The attorney explained that Brown, who is 49 and lives at 137 Rhode Island Ave. N.W., already had been tried on the two indictments but that a hung jury in both cases necessitated retrials. In one case, the jury had been deadlocked at 10 to 2 for acquittal and in the other at 11 to 1 for acquittal, McLaughlin told Judge Keech.

One jury, hearing charges that Brown had performed an illegal operation on a 19-year-old telephone operator, was dismissed November 26 after it was hopelessly deadlocked.

Another jury, hearing charges that he had performed an illegal operation on a 24-year-old woman, was dismissed on March 24, 1948, when it failed to agree after 6 1/2 hours of deliberation.

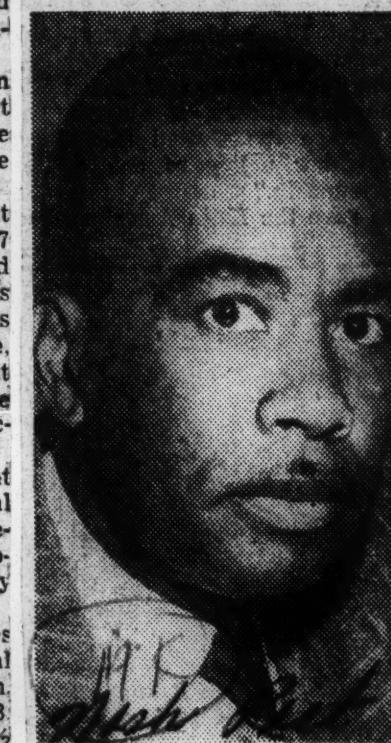
Dr. Brown was acquitted October 27, 1948, of a charge that he performed an abortion on a 24-year-old typist. On one other occasion, an abortion charge was nolle prossed against him when the witness declined to prosecute.

In Surgical Society



Dr. Louis T. Wright, New York City police surgeon and surgical director at Harlem Hospital, has been elected to membership in the New York Surgical Society, where all members previously were white. Chairman of the board of directors of the NAACP, Dr. Wright is also a fellow of the American College of Surgeons and a diplomat of the American Board of Surgery.

Doctor Named To Gallinger Post



Dr. PAUL E. CORNELIUS, medical director of Freedmen's Hospital, has been appointed to the executive committee of Gallinger Hospital. The committee post was created October 5 in an agreement by officials of Georgetown, George Washington, and Howard University medical schools for joint use of Gallinger's medical training facilities.

Doctor Denies Charges Of Illegal Operations

By A. M. RIVERA Jr.
(Courier Staff Correspondent)

Pittsburg Pennsylvania
1948
FUQUAY SPRINGS, N. C.—Dr. J. Buste Davis, prominent physician here, indicted last week on charges of manslaughter and abortion in connection with the March 27 death of Miss Colleene Hill and with performing an illegal operation on Miss Louise Goff in 1946, denied all guilt and told The Courier that the allegations were "absolutely groundless."

Dr. Davis, 65, who has been practicing medicine here about eight years, was indicted on two counts in the Wake County Superior Court by the grand jury early last week. *1-12-48*
"TRUE BILLS" RETURNED

Solicitor W. Y. Bickett revealed that an investigation into the Dr. Davis' alleged activities here began several months ago and that "true bills" were returned by the grand jury on information obtained by the State Bureau of Investigation and Assistant Solicitor Howard E. Manning.

The defendant was charged with manslaughter in the death of Miss Colleene Hill, 22, last January, and with performing an abortion on Miss Mamie Louise Goff in 1946, both of Sanford, N. C.

According to Solicitor Bickett, Miss Hill died in Lee County Hospital at Sanford from an abortion allegedly performed on her by Dr. Davis last March 27. The solicitor said that the criminal operation was allegedly done at Dr. Davis' office where she remained for several days. She was said to have returned to her home at Sanford April 7, and later died from the effects of the operation.

PARENTS SENT AWAY

The investigation conducted by the SBI and Manning revealed, according to Bickett, that Dr. Davis had also allegedly performed an abortion on the parents of the girl to New York after her death. He also stated that he had in his possession information that Dr. Davis

1-12-48
A capias was issued for the physician to be taken into custody last week on both charges and bond was fixed at \$10,000.

Solicitor Bickett stated that trial of Dr. Davis would not be possible at this term of court because the parents of Colleene Hill will have to be brought back here from New York as witnesses.

Dr. Davis termed the criminal charges against him as "absolutely groundless," and told this reporter that Miss Hill came to him from Fayetteville, N. C., critically ill throughout the State, not with the effects of an abortion reported to have been performed by a mid-wife. He stated that he treated her for ten days during which time her response to treatment was satisfactory. According to Dr. Davis, Miss Hill became impatient and insisted upon leaving



DR. J. BUSTE DAVIS
though he had warned her that she wasn't well enough to leave.

Two days later Miss Hill was admitted to the Lee County Hospital in Sanford where she lived sixty days before she died.

DENIES KNOWING MISS GOFF

The defendant denied any knowledge of Miss Goff, on whom he had also allegedly performed an abortion.

A capias was issued for the physician to be taken into custody last week on both charges and bond was fixed at \$10,000.

Solicitor Bickett stated that trial of Dr. Davis would not be possible at this term of court because the parents of Colleene Hill will have to be brought back here from New York as witnesses.

Dr. Davis, well known in medical, civic and educational circles throughout the State, not with the similar counts which previously resulted in hung juries.

Colored Physician Elected Coroner of Wayne County

(By Isaac Jones)

RIVER ROUGE, Mich. — (AP)—Another man of the colored

democracy-side was added to the list of Wayne county Tuesday night, according to reliable sources. *1-12-48*
Dr. Amuer B. Milton, coroner of this county. It marks the first time in history that a colored physician has been elected to the coroner's office by the votes of the people of Wayne county.

The coroner's position carries a salary of \$5,000 per year, plus allowances for expenses.

Medic Gets High Post at U. of

CHICAGO—Dr. N. O. Calloway, director of medical affairs of Provident Hospital 5751 Indiana Ave., recently has been given new responsibilities at the Medical School of the University of Illinois. *1-12-48*
Already an assistant professor of medicine at the Institution, he has now been placed in charge of all the medicine taught to certain classes. Besides this, Dr. Calloway directs research for students seeking the Ph. D. degree.

It is, as far as is known, the only case in which a colored person work at the highest of all graduate levels. Dr. Calloway is also a consultant for the research being done in convalescence for the U. S. Navy at the University of Illinois.

Minorities Surpass Whites Attending S. C. City Colleges

ORANGEBURG, S. C. (AP)—In proportion to their numbers, more colored high school graduates of Orangeburg than whites attend college, a survey taken here revealed last week. *1-12-48*

City Superintendent of Schools E. W. Rushton made the announcement after the survey committee had completed its report. He explained that this was probably because two colored colleges are located here.

According to the survey, one out of two Orangeburg colored high school graduates go to college, but only one out of every three whites goes. The two colored colleges here are Claflin and State A. and M.

Say Fulltime Research Personnel Needed For

Research Job

Dr. N. O. Calloway, medical director of Provident Hospital for the past year,

No reason was given for the resignation, but it was assumed Dr. Calloway wants to devote full time to his new post as a research director in the medical college of the University of Illinois.

The 40-year-old physician and chemist has long been an associate professor of medicine at the University. He has a doctor of philosophy degree in chemistry and bacteriology, and has written several articles on early post operative convalescence.

His specialty is internal medicine and he has been a consultant to the Navy on a research project in convalescence at the University.

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QUALIFIES — Mildred R. Dixon, DSC of Tuskegee Institute, recently passed the State Board of Health examination and is now qualified to practice surgical chiropody in Alabama. Dr. Dixon is a graduate of the Ohio School of Chiropody.

Massachusetts Lauds Dr. Hinton

BOSTON—In a recent radio ceremony Gov. Robert F. Bradford and Dr. Walter A. Gating, Massachusetts

Commissioner of Public Health, gave public tribute to Dr. Hinton, Philip R. Mather, president of the Massachusetts Society for the Prevention of the Detection of Syphilis. On the board of directors of the Massachusetts Society for the Prevention of the Detection of Syphilis, Dr. Hinton received two honorary awards—honorary membership in the American Hygiene Association, and an honorary membership in the Harvard Medical School. *1-12-48*



surgeons, largely from the staffs of LSU, Tulane and Flint-Goodridge, who will act as instructors are:

Dr. Edgar Hull, LSU professor of medicine; Dr. Maes, Dr. Alton Ochsner, Tulane professor of surgery; Dr. James D. Rives, LSU professor of surgery; Dr. William A. Soceman, Tulane professor of prevention of tropical and semi-tropical diseases and hygiene; Dr. Conrad G. Collins, Tulane professor of gynecology and associate professor of obstetrics; Dr. Curtis J. Lund, LSU professor of obstetrics and gynecology; Dr. Ralph V. Platou, Tulane professor of pediatrics; Dr. Myron E. Wegman, LSU professor of pediatrics, and Dr. J. K. Howles, LSU professor of dermatology and syphilology.

~~Sole White Doctor Quits Town Because Negroes Couldn't Work On His New Home~~

DR. HOWARD MCNEIL
DR. HOWARD MCNEIL: Re-elected to the City Commission for a fifth term. He is one of the city's leading physicians and is as active in civic affairs as his practice will allow.

NEGRO PHYSICIANS SIGN FOR COURSE

30 to Attend Flint-Goodridge Classes Here

James Dickerson
Thirty Negro physicians from six states had registered in advance Saturday for the 13th annual medical postgraduate course which begins at Flint-Goodridge hospital at 8:30 a. m. Monday.

Registrations have come in from Texas, Oklahoma, Florida, Arkansas, Mississippi and Louisiana, and hospital officials expect a total of 45 to register for the opening class.

The one-week course is designed to assist the general practitioner, covering many fields of medicine and surgery.

The program is under the direction of the Flint-Goodridge medical advisory board, of which Dr. Urban Maes, professor emeritus of surgery at the Louisiana State university school of medicine, is chairman.

Other members are Dr. Maxwell E. Lapham, dean of the Tulane university school of medicine; Dr. Vernon W. Lippard, dean of the LSU medical school, and Dr. Rivers Frederick, chief of the Flint-Goodridge department of surgery. Among the 52 physicians and

Palmer, Tenn.
PALMER, Tenn. — (AP) — This East Tennessee coal mining community of 3,000 is without the benefit of medical protection, as of last Thursday because of the action of the only doctor in closing up his clinic and moving to the home of his mother near McRae, Ga.

Dr. Oscar H. Clements, 38, white, moved his family to Palmer and stored his clinical equipment at Chattanooga, after having practiced here for the last 14 years. His moving was in protest against racial discrimination that recently denied Negroes the right to work on his new home.

According to Clements, his construction foreman told him that five men came to the house site after the foundation had been laid and warned four Negro bricklayers from Chattanooga not to begin work. The foreman, Joe Creighton, said one of the five told the bricklayers, "We won't even allow Negroes to come into Grundy county, much less work here."

The bricklayers had been imported because there were no local workers available.

The townspeople want the doctor to return, but are unanimous in saying that Negroes are forbidden to work in Palmer because of racial discrimination. Deputy

Sheriff Jim Dickerson at Tracy City investigated the report, but says he would take no action. "There may be one or two Negroes in the county, but I'm not sure."

Grundy is listed as having 11,552 residents.

~~Negro Surgeon Studies At VA Conn. Hospital~~

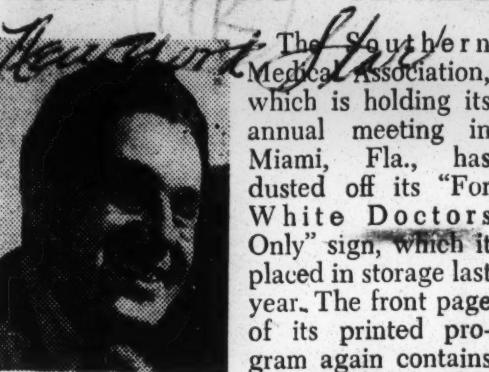
Newington, Conn.
NEWINGTON, CONN.—(AP)— Through the intervention of Yale university officials, Dr. Cyril Jones, a student of surgery, is getting part of his training as a surgeon in the U.S. Veterans hospital here. Jones was appointed to the hospital as a resident on surgical service by the Yale University Medical School, the first Negro in the state to be accepted.

A graduate of Tufts College, Dr. Jones studied medicine at Harvard Medical school and completed his studies under the U.S. Navy V-12 program. He began active duty with the navy as one of its first Negro officers on July 9, 1945, serving with the Seabees and at Great Lakes Training station. The navy had only three Negro medical officers at that time.

Leased from the service, Dr. Jones began his training as a specialist in surgery on July 15, 1946. He credits Yale with having insisted that he be accepted at Newington rather than be sent to an all-Negro hospital.

Half-way through a training program which ends in his examination before the American board of surgery for a certificate as a specialist in general surgery, Dr. Jones also serves as exchange resident in surgery at the New Haven hospital. In addition, he has further broadened his experience as a teaching fellow in pathology at McGill University Medical school.

Race Bias — A Medical Disease



Deutsch

Deutsch
The Southern Medical Association, which is holding its annual meeting in Miami, Fla., has dusted off its "For White Doctors Only" sign, which it placed in storage last year. The front page of its printed program again contains the familiar statement: "White physi-

cians who are members of their county and state medical societies will receive a most cordial welcome at Miami."

It may be recalled that at its last annual meeting, held in Baltimore, the 42-year-old SMA grudgingly allowed "any licensed physician" to attend its scientific sessions from which Negro doctors have been traditionally excluded. The SMA switch in 1947 came after vigorous protests on the part of white and Negro doctors in the famous medical center against lily-white medicine.

Only Whites Eligible

The barring of Negro physicians from the SMA's scientific sessions represents far more than a blunt insult to particular members of the profession or to a racial group. It reflects the viciously un-American tendency to deny to qualified members of the healing art common access to modern medical knowledge that could make them more competent in treating human disease and saving human life.

The program of this week's sessions in Miami bears out the proud boast of the Southern Medical Association's announcement of its annual meeting:

"In the general clinical sessions by Miami physicians and surgeons, the 21 sections and the scientific and technical exhibits, every phase of medicine and surgery will be covered—the last word in modern, practical, scientific medicine and surgery. Addresses and papers by distinguished clinicians not only from the South, but from many parts of the United States."

Physicians south of the Mason and Dixon line look forward with justifiable eagerness to attendance at this annual meeting. But who among them will be privileged to see the fine scientific exhibits and hear the interesting scientific papers? The SMA program spells it all out in painful detail, in a prominently-featured item, "Who May Attend Miami Meeting":

"White physicians in practice who are members in good standing of their local and state medical associations; white physicians of the U. S. Army, Navy, Public

Health Service and Veterans Administration; white faculty members of medical schools; white personnel of health departments; white personnel of recognized hospitals; white hospital residents and interns; and white senior and junior medical students."

The lowliest white medical student is "most welcome;" the most distinguished colored physicians are barred. Negro physicians, even the most highly qualified, are not only excluded from membership in this organization, but not even allowed to attend sessions along with other non-members.

About half of the nation's 4000 Negro doctors practice in the South, where more than 9,000,000 Negro Americans live and work on a second-class citizenship basis. *Deutsch*
There are actually fewer Negro physicians in the South today than there were 16 years ago. The younger, better qualified doctors are reluctant to settle in an area where they are denied, at every hand, opportunities to enhance their skills and knowledge—such as being barred from medical meetings.

Their Patients Suffer

It is their patients, ultimately, who suffer from the shameful walls set up by Southern medical societies against Negro physicians.

The American Medical Association, which periodically indulges in pious hypocrisies about the universality of the Hippocratic art, still hasn't lifted a finger to prevent the bigoted brethren from keeping qualified colored physicians in the South from becoming members of the AMA itself. It is worthy of note, in the matter immediately under discussion, that Dr. Edward L. Henderson of Louisville, Ky., who is presently the chairman of the American Medical Association's all-powerful board of trustees, is at the same time a member of the Southern Medical Association's board of trustees. He was president of the latter organization last year.

The lily-white SMA, in barring Negro doctors, is not only exhibiting an un-American, unprofessional and anti-scientific racial animus; it is actually proving itself a friend of the diseased enemies of man.

Doctor Cleared Of D. C. Charge

Washington, D. C.
WASHINGTON, D. C.—(NNPA)—A weary District Court jury *Deutsch*
Tuesday, October 22, found Dr. Schley Brown not guilty of performing an abortion. It had wrangled over the verdict for more than ten hours.

The four women and eight men

on the panel filed into Judge Henry Schweinhaut's courtroom shortly before 11:30 a. m., to announce the acquittal. *Jul 11-3-48*

They had resumed deliberation at 10 a. m., in the wake of an unfruitful nine-hour session the day before. *Atlanta Ga.*

It was the fourth time Dr. Brown has walked out of District Court a free man after abortion charges against him collapsed.

In the latest case, the Government's key witness told the jury she was paid to get out of town so she couldn't testify.

Letters to the editor must carry complete name and street address of the writer, though pen names may be used at the editor's discretion. Letters of less than 200 words are given preference. All letters may be cut.

Admit Negro M.D.s To County Medical Society

EDITOR, THE ADVERTISER—Re: your article 10-17-48 issue re: doctors: I object to the statement that medicine is a business. *19K*

Any conception of business that it is a bilateral affair—parties involved assume a contractual basis. In other words, a trade or barter in the making. It has a monetary flavor. *Oct 22-48*

Medicine is humanistic—distinctly a mandatory unilateral affair. The doctor is legally and morally responsible for everything he says or does. The one seeking medical aid is not so bound. To repeat, to say medicine is a business, virtually gives this profession a derogatory flavor.

I never heard of a patient being denied medical service on account of not having the wherewithal.

Hospitals do not operate in such a magnanimous spirit. A patient without funds has a most difficult time to be admitted into a hospital—even though for tax purposes they are listed as charity institutions. *Montgomery Ala.*

Now a few comments re: colored doctors' status in Montgomery. I am surprised at your statement that colored doctors may attend their patients in "white hospitals." This is erroneous.

I also take exception with your remark that none of the colored doctors are educationally qualified to perform surgery! I know of the qualifications of these men. They have academic degrees in addition to the conventional M.D. They have served as internes and residencies in specialties, including surgery. At least one has a master's degree in medicine. Fewer than five white doctors have this degree.

Within the current month a colored doctor who resides less than 50 miles from Montgomery was honored by acceptance into the American College of Surgeons. I could go on and on. But sufficient has been said to refute your statement "that colored doctors here are educationally not qualified."

I have witnessed surgery performed by these men—without adequate hospital facilities. They not only do their work eagerly, zealously, but efficiently. It is not a business with them, they are motivated by humanitarianism. In most instances their only reward is of a job well

done.

I for one wish that they had hospital facilities. Also like the spirit shown by the American College of Surgeons—would like to have them admitted for membership into our county medical society.

First Negro Medic At Beekman Hospital Gives Tip On Success

By LILLIAN SCOTT *19K*

NEW YORK—Dr. William Charles Kilpatrick, the only Negro on Beekman hospital's downtown staff and one of the few Negro doctors ever employed in a like capacity by any private hospital, is a young man with a prescription for success.

When assured that his views might be of help to other young doctors, Dr. Kilpatrick said:

"It's not so much if you're colored if you get in there and distinguish yourself as not just another doctor. Give the impression that you're on your toes all the time and that nothing slips by you and be more or less definite when once you've made up your mind. If your diagnosis holds up as well or better than that of other staff doctors, I think you're accepted." *Lucy 100*

But young Dr. Kilpatrick admits that when he first went to the downtown hospital "there was certain coolness." He went in June of 1947. He says:

"By last October, I was accepted as competent, as knowing my ABGs.

Rushes To Uncle's Rescue

A native New Yorker, Dr. Kilpatrick went to Morehouse college because he had an uncle in Atlanta with six daughters. The uncle wanted a young husky nephew around, one who would play football and baseball. After Morehouse, Kilpatrick finished Howard Medical school in 1945. The next year he married the attractive Lillian Kilpatrick.

He interned for a year at Harlem hospital, where they wanted him back for the staff, and then he went to Bellevue hospital, one of the city's largest institutions, where he was the first Negro in charge of their admitting office from September 1946 to May 1947.

A month later he went to Beekman where he is in charge of the Emergency room and surgical outpatients' department and where he directs the activities of three other doctors.

When Stocks Are Falling

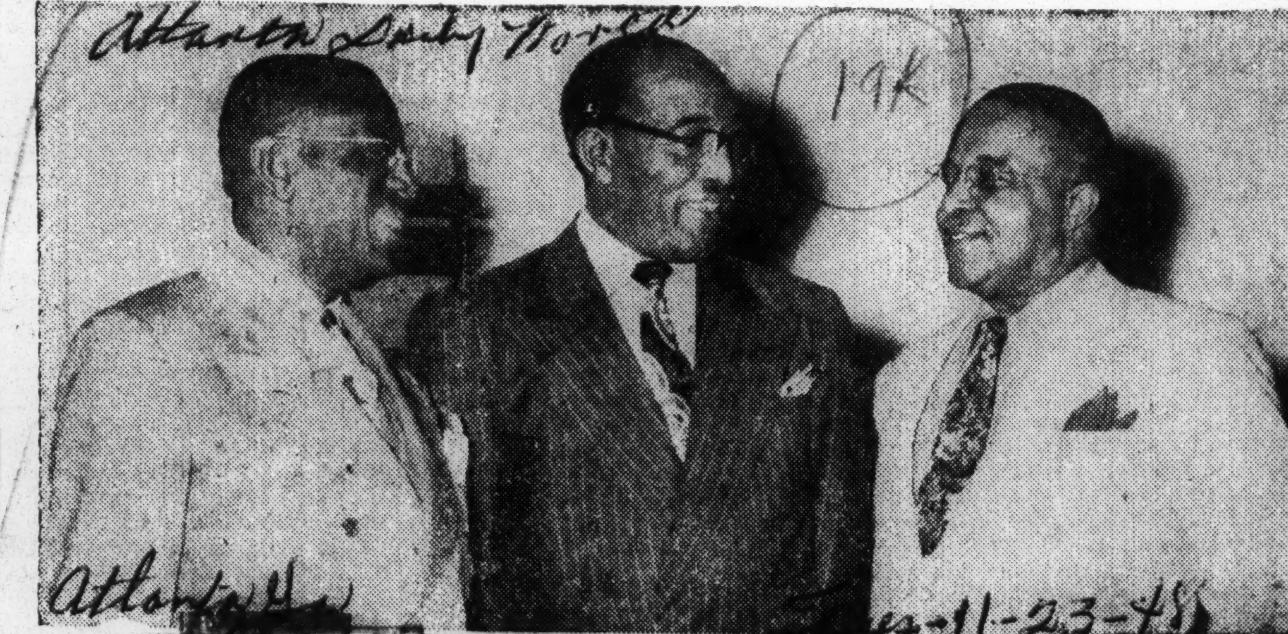
Beekman's is famous with downtown business people, especially with Wall street. And they go there frequently, as Dr. Kilpatrick emphasizes in his quip: "When stocks start falling, their hearts start failing."

Dr. Kilpatrick began his own private practice this summer with

a handsome office in the Riverton development where he lives. Since September of last year he has had the privilege of taking his patients at Beekman.

Asked if attending a Negro medical school interfered at all with his education, he said 'no.' He explained that many of the textbooks and courses are similar regardless of what school one attends and said again he thinks it's a matter of seriousness of attitude and hard work which determines the student's ultimate success.

A warm, forceful person, Dr. Kilpatrick seems to have found that his prescription works—at least for him.



LEADING PSYCHIATRISTS AT TUSKEGEE VA

Above are the three leading psychiatrists stationed at the VA hospital, Tuskegee, Ala., all Fellows of the American Psychiatric association and all certified by the American Board of Psychiatry, there being only nine Negroes in the country so honored. They are, left to right: Dr. Prince P. Barker, Dr. George C. Branche, Dr. Alan P. Smith, Jr.

RACIAL BIAS SEEN IN MEDICAL PLAN

19K-10-58
AMA Gets Resolution Scoring Segregation of Negro Doctors

medical colleges. Some doctors have held that the establishment of such facilities would help alleviate racial tension and would increase the opportunities for training schools opened for the purpose of Negro doctors.

Segregating Negro doctors during Dr. Lattimore declared that this training was introduced before the would be an undemocratic solution to the problem of making training facilities available on a non-racial basis. As taxpayers, Negroes are entitled to full use of public training institutions, he added.

The association is holding business meetings at Wadleigh High School, 215 West 114th Street. Scientific sessions are being held there and in seven local hospitals.

Formal dedication of the Mount Morris Park Hospital was made a part of the week-long convention at a ceremony at the hospital, 121st Street and Morris Park West.

The president of the group. The of the group. The of the association for 1948 was presented to Dr. W. G. Alexander, Justice Francis E. Rivers of City of Orange, N. J., during the cere-
monies. The fifty-four-bed hospital recently was purchased by a group of physicians practicing in the Harlem area and will be operated as a non-profit com-
munity hospital. Dr. Cecil Marquez, The distinguished service medal

Medical Body Drops Racial Bar, to Admit St. Louis Physicians

ST. LOUIS—(AP)—Voting 32 to 10 to delete from its constitution a requirement that members be of the white race, the St. Clair County Medical Society last week threw open its doors to physicians of all races. It was voted that colored doctors are eligible for membership.

The action ended a fight which began eight years ago but was lost then by a narrow margin. The victory was attributed to the recent action of the American College of Surgeons and the International College of Surgeons in admitting a physician who had been barred from a local body because of his race.

Seek To Join White Medics

LOUISVILLE—(AP)—For the first time in history three Negro physicians have applied for admission to the 343 white Jefferson County Medical society. Other colored medics are expected to apply too.

Drs. J. H. Walls, Roscoe C. Bryant and Maurice Rabb sent in their applications two weeks ago. According to Dr. W. C. Lett, president of the National Medical Association, the Negro group, he and other members will also seek membership in the county group.

He said that their aim was to become members of the American Medical Association and receive the benefits that come from that group. "There is no thought of social equality behind this," he said.

The medics' actions are believed to be based on the recent change of the society's membership requirement from "white only" to "acceptable physician."

Admittance to the county group would make it possible for Negroes to seek membership in the state medical association which in turn would give them a chance for the AMA itself. The Southern Medical Association changed its "white only" clause in its 1947 meeting in Baltimore. Dr. Lattimore pointed out.

The electorate has a right to demand that responsible political leadership define the social and economic areas where "compulsion" is to be applied. Does compulsion apply to mandatory participation by the underprivileged beneficiary or to the method of financing?

Objective answers to the question thus posed brings challenging conclusions. Compulsion applicable only to the indigent and

Hippocratic Oath Revised

Serious students of medical economics are encouraged by the emerged areas of agreement between physician members of the World Medical Association. Its second general assembly in Geneva, September 8 to 11, was pursuant to world wide aims.

These were intended to elevate medical ethics, standards of health and education, and to defend the status of physicians against encroachment by the state. To these altruistic ends the Hippocratic Oath was modernized to outlaw the inhuman acts perpetrated by Nazi physicians. In part it now pledges "... I will not permit consideration of race, religion, nationality, party politics or social standing to intervene between my duty and my patient."

This means responsible political leadership now must take the Hippocratic Oath of a new world order of social justice and Social security: I will not permit consideration of race, religion, nationality, party politics or social standing to intervene between my duty and my constituents.

THOMAS E. MATTINGLY, M.D.
Washington.

Lily-White Medical Group Votes to Drop Race Bars

Baltimore BALTIMORE Members of the Baltimore City

Medical Society, an affiliate of the Maryland State Medical and Surgical Faculty and the American Medical Association, voted unanimously at their meeting last week to admit colored physicians to their organization.

There are approximately 80 minority group physicians in Baltimore of whom about half would be expected to seek membership in the society, a step which would greatly enhance their professional standing, it was pointed out.

Membership in the local society is a necessary qualification for members in the State and nation. To which local colored physicians heretofore have reported from Dr. W. Horsley Gant, chairman of a committee of three investigators of local racial relations in the medical profession, who declared that the consensus of Baltimore white doctors that colored doctors should be accorded the privilege of society membership.

Dr. Gant pointed out to the 250 physicians attending the meeting that barriers erected against colored physicians by the non-admittance policy afflicted them with an unpleasant professional and social stigma—"just as though

Louisville Doctors Refuse To Admit Medics To Society

LOUISVILLE—(AP)—Members of the Jefferson County Medical society here turned down an amendment to their constitution which would call for the admission of Negro medics to the society in a two hour session this week.

Dr. Joseph C. Bell, president, said a large number of members voted for the amendment. Earlier this year in January, the group had voted to admit Negroes but officers ruled the vote illegal because of a technicality in the by-laws which says that no amendment can be voted upon on the same day it is introduced.

VOTE REASONS

According to Dr. Hart Hagan, chairman of the public relations committee, those who voted against the amendment did so on two counts. 1. Since segregation still exists in schools and churches and public institutions in Louisville the society is "not quite ready" to admit colored medics. 2. It would not be right to force Negro membership on the state society until it could meet and make a decision for itself. The state group has not met since the Negro question arose.

Those against segregation argued that the society wanted to aid other members of the medical profession to advance in scientific knowledge.

Dr. Hagan added that many members wanted Negro medical men to be invited to the society meetings.

Dr. Gant Urges Step

Action by the BMS followed that before the war colored physicians had attended the group's meetings when they were held at General Hospital, but none had been invited to the meeting, but Dr. Gant said no objection was raised.

It was pointed out by Dr. Bell

that the BMS's social as well as

scientific meetings was not fully

discussed at the meeting, but Dr. Gant said no objection was raised.

Since the war the society has held its meetings at the Pendennis Club.

19k 1948

New York Surgical Society

N.Y. SURGICAL SOCIETY
ELECTS LOUIS T. WRIGHT

19K
April 29, 1948

NEW YORK, April 29.--Dr. Louis T. Wright, chairman of the Board of Directors of the National Association for the Advancement of Colored People, has been notified of his election to membership in the New York Surgical Society. He becomes the first Negro member of the 69-year-old society composed of the leading surgeons in the area.

The famous New York surgeon is already a fellow of the American College of Surgeons and a diplomate of the American Board of Surgery. Surgical director of Harlem Hospital, Dr. Wright has served on the staff of that hospital since 1920. He is also a police surgeon with the New York City Police Department and is the author of numerous articles on medical and surgical subjects.



19K
FORST NEGRO ELECTED TO SURGICAL SOCIETY—
New York—Dr. Louis T. Wright, the first Negro doctor to be elected to the 69 year-old New York Surgical Society, is shown in the operating room of Harlem Hospital, where he is Surgical Director, with Nurse Marie Marks of 301 St. Nicholas Ave. Dr. Wright, the chairman of the Board of Directors of the NAACP, is really a fellow of the American College of Surgeon and a diplomate of the American Board of Surgery. He is also a police surgeon with the New York City Police Department. (Keystone Pictures)

**Negro Elected to
Surgical Society**
NEW YORK—Dr. Louis T. Wright, chairman of the Board of

19K
Directors of the National Association for the Advancement of Colored People has been notified of his election to membership in the New York Surgical Society. He becomes the first Negro member of the 69-year-old society composed of the leading surgeons in the area.

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Dr. Cobb Calls for Speed in Erasing Medical Bias

Baltimore, Md., October 12, 1948
Warns Health Problems Can't Be Solved
by Segregation; Studies in Pamphlet Form

NEW YORK—A "must" reading for medical practitioners and all groups and citizens active in the fight for better medical care and hospitalization for colored Americans, is a revealing and challenging report on "Progress and Portents for the Negro in Medicine" by Dr. W. Montague Cobb, professor of anatomy, Howard University.

Published in November by the NAACP, 20 W. 40th St., NYC 18, from whose offices it can be secured at 25c per copy, the pamphlet contains a historical review and statistical analysis of opportunities for colored people in health fields, and can be used effectively by racial and interracial agencies.

Quick Action Urged

The noted physician declares: "The urgency of the immediate significant fact is that: remedy of conditions is accentuated by the recognition that, were replaced at Howard, and 800 at Meharry, 55 of whom were admitted, facilities for both training, and only about 200 approximated the treatment to be dropped, to non-qualifications of the accepted group."

"It would require at least 10 years before parity for the minority could be approached in areas where he is below the national norm."

Segregation Scored

Dr. Cobb concludes from this and previous studies that: "Justice and equality of opportunity in health matters, as in other things, cannot be achieved under a segregated system."

In support of this he cites the findings of "national bodies of commanding prestige" such as the President's Commission on Higher Education, and the Commission on Hospital Care.

He warns that "present indications are that every attempt by adherents of the status quo will be made to block or circumvent real changes in the entrenched system of segregation both in respect to medical educational and hospital facilities.

Training Bars Up

Dr. Cobb points out the urgent need for the services of colored health workers and the obstacles confronting them in attempts to secure training, pointing out that more than one-third of the nation's training facilities in medicine, dentistry and pharmacy are closed to them.

a professor of anatomy at Howard University, is chairman of the National Medical Association's Council on Medical Education and Hospitals, and a member of the National Medical Committee of the NAACP.

The pamphlet deals with the rising interest in matters of health affecting the Negro and outlines beginnings toward correcting conditions dangerous to the welfare and health of the general population. Walter White, NAACP secretary, declares in the foreword that Dr. Cobb's findings call for "a clean sharp break with the past" based on the obvious impossibility of solving problems of medical education for Negroes and health care for the Negro population under the present segregated system of training and care.

A Critical Situation

The Association of American Medical Colleges reports that in 1947-48 there were only 26 colored freshman medical students in schools other than Howard and Meharry.

Dr. Cobb concludes:

"A situation in which colored students are not admitted to 26 of 78 approved medical schools, 16 of 36 dental schools, 20 of 65 pharmaceutical schools or a third, nearly a half, and a third, respectively, of the nation's training facilities in these professional fields, urgently demands correction."

PUBLISH NEW

PAMPHLET ON NEGRO IN MEDICINE

NEW YORK, Nov. 15—A new pamphlet entitled "Progress and Portents for the Negro in Medicine" by W. Montague Cobb, M. D., has been published this month by the National Association for the Advancement of Colored People. Dr. Cobb,

Surgeons Society



INDUCTED INTO SURGEONS SOCIETY—These distinguished medicos were recently initiated as new members of the College of American Surgeons at the society's annual convention in Los Angeles. Front row, left to right: Drs. Roosevelt Brooks, Chicago; Henry E. Hampton, St. Louis; Robert E.

Wilkerson, New York; William H. Sinkler, St. Louis; Jesse Green, New York. Rear row: Drs. Henry C. Welcome, Baltimore; Dr. William T. Jackson, Baltimore; George Thorne, New York; Lionel A. Mahone, Tuskegee; J. Bradshaw Higgins and R. L. Jackson, Baltimore.—McLain Photo.



CONGRATULATED—Dr. R. L. Jackson of Baltimore, Md., recently inducted into the American College of Surgeons, receives congratulations of a former classmate, Dr. W. A. Beck, while in Los Angeles for the induction ceremonies.—Hazel Photo.



WELCOMED—Dr. Roscoe Giles, Chicago, a member of the American College of Surgeons, is greeted by Dr. Thomas Roy Peyton, president of the Southern California Medical-Dental and Pharmaceutical Association.—McLain Photo.

19k 1948

Virginia

Limited Hospital Practice Given ~~to~~ ^{to} Negro Doctors

LYNCHBURG, Va.—After persistent effort for 12 years, Negro physicians here have succeeded in getting limited staff privileges in the hospital here. Their practice will be restricted to colored patients. The privileges have been granted for a trial period through Dec. 31, Robert S. Hudgins, administrator, said.

The fight for the right to treat patients in local hospitals was led by Dr. R. Walter Johnson, chairman of the committee of colored doctors, and Dr. Leon Braswell. Dr. Robert Wesley is also a member of the committee.

~~LIMITED PRACTICE~~

The doctors wrote Dr. Joseph A. Houck, chairman of the hospital's medical staff, asking staff membership and the privilege of treating patients in general practice. The executive committee of the hospital unanimously granted the request, with the proviso that the practice of colored doctors be restricted to areas devoted to Negro patients.

One of the problems was the nurse situation. In April, 1939, a majority of the staff had approved some colored physicians practicing in the hospitals provided that Negro nurses were employed. There was objection to orders being given to white nurses by Negro doctors.

The three doctors suggested two possible solutions: Employ Negro nurses on the two floors of the Negro section of the hospital, or have patients of Negro doctors admitted under the name of one of the white staff doctors and orders given by the white doctors for the colored.

~~TEXT OF LETTER~~ 19

The letter submitted by the committee of colored doctors read, in part:

"We feel that if the above plan is tried and is successful, the need for a separate colored hospital will be unnecessary, thereby eliminating dual maintenance. This has been tried in other cities in Virginia and the South where colored hospitals are not available and it is working fine without exception."

"Exclusion from hospital staff practice effectively denies to Negro doctors the educational value of these connections and in turn affects the quality of medical care."

She Fought Black Magic—

The Montgomery Advertiser
Alabama Negro Woman Doctor
Montgomery
Lauded For Medical Articles

Sent to Liberia by the Baptist
Missionary Board in 1929.

Several stories in medical procedure which have appeared in the Medical Woman's Journal have brought widespread acclaim for the author—an Alabama Negro woman doctor.

A number of colleges and universities, both white and Negro, have released bulletins commending the articles and suggesting that they be studied by practicing physicians.

The author short and plump Dr. Pauline E. Dinkins, 807 Minter Street, Selma, Ala., says that she is overwhelmed over the enthusiastic response accorded her articles. She was especially surprised, she says, that Medical World had wired for permission to reprint them.

"I didn't dream the articles would cause all this attention," she declares. "I sent them to the magazine just to see what would happen if an editor should look

Perhaps she shouldn't be surprised, however, for other articles she has written within recent years, also have received considerable recognition.

Dr. Dinkins, whose large practice is devoted to Negroes, lives in a small frame house. An aged sign in front says only two words — Dr. Dinkins — but to

"I am a Baptist," she declares. "I believe that each person should be his brother's keeper."

Daughter of the late Dr. T. H. Dinkins, former president of Selma University, she is a graduate of Virginia Union College, Richmond, Va., Union Medical College, Philadelphia, and was selected as one of the outstanding pupils at the University of London, England, where she studied tropical fevers.

She says she attended college on a "hope and prayer" and by teaching languages at Roger-Williams University, Nashville, Tenn. She speaks Greek, French, Latin, German and Spanish.

After graduation, she practiced medicine in Selma for five years and was director of women's health at Tuskegee Institute for two years.

Visited Liberia

Returning to Selma as a general practitioner, she often has been consulted as an authority on tropical fevers. Many veterans have found her an able physician in the treatment of their malady. At the present time, her practice is so large, Dr. Dinkins says she can not see all her patients.

Dinkins set up the first Baptist hospital in Liberia at Monrovia. At that time, Liberia was a far cry from the improved land of plenty it is today. Only three doctors were in an area as large as the state of Alabama. Dr. Dinkins was the only Negro of the three and only graduate in tropical fevers.

When she landed in Liberia, an epidemic of malaria was rampant. Natives came 200 miles to

the hospital to be treated and

one boy, who later became a hospital attendant, walked 60 miles through the jungles to the hospital to be treated for malaria.

As medical director, surgeon and adviser to the natives, Dr. Dinkins was also responsible for

the Christian guidance of the natives. Her largest problem, she said, was treating the natives, God here."

Commenting on racial conditions, Dr. Dinkins said, "I have never known racial prejudice . . .

I could have lived 'up north' but I had rather stay where my heart is—here in Selma . . . I can do more good for my people and

since they had known only witchcraft and voodoo, and referred to as an outstanding Negro

tubes, bottles, needles and spirits president of Selma University.

Asked about her plans for the future she said she was going to continue writing but was trying with fear.

She said many natives gathered to cut down her medical practice in the shadows of the hospital and whispered about the "I'm not as young as I used

to be, you know."

"I battled head-hunters, doctors, and savage customs," she asserted, "but when I left a camp I knew there was some iota of Christianity there."

Contracting malaria in 1929, she treated herself since the nearest doctor was 500 miles away. But the medical magic she had used successfully on

the "black woman from across the seas." Her condition became so acute that the mission board ordered her immediate return to the United States to undergo medical treatment.

During the last war, Dr. Dinkins learned the hospital she had founded was used by the U. S. Army as the first hospital base

in Africa for American soldiers.

Writes Book

Following her return stateside, she began the writing of a book of folk tales she had heard in Africa which was printed under the title "African Folktales." The book sold out many editions and is being currently reprinted. She also contributed articles on Liberian problems to national publications.

A National Health Program
The Times
 Adequate Medical Care for Majority of
 Population Is Envisaged
 New York, N. Y.
 To THE EDITOR OF THE NEW YORK TIMES:

Your excellent reporting of the National Health Assembly just concluded in Washington hardly emphasized enough the fact that the high costs of sickness are now everybody's business — laymen and physicians alike. At that meeting, over 600 representatives of the medical and allied professions, and of business, labor, farm, church, women's, veterans', cooperatives, and other groups framed a national health program. *Thurs. 5-20-48*

For the first time, health insurance has been unanimously recognized as a far better system of paying sickness bills than the traditional "fees for service." The insurance principle would abolish everybody's worry about unpredictable doctor and hospital bills.

In unmistakably clear terms, the Assembly declared: "Adequate medical service should be available to all without regard to race, color, creed, residence, or economic status." * * *

"The principle of contributory health insurance should be the basic method of financing medical care for the large majority of the American people in order to remove the burden of unpredictable sickness costs, and avoid the indignities of a 'means test.' " * * *

All of us can also assent to other basic principles which the Assembly endorsed:

Supplement health insurance through tax funds where necessary.

Encourage voluntary health insurance plans, particularly in rural areas.

Remove present restrictive laws against such voluntary plans.

Coordinate medical care services.

As a private practitioner of more than forty years' experience, I am gratified to note this agreement on many principles. However, on the basis of that same experience, I think it important to call attention to our conviction, which many laymen and doctors at the Assembly shared, that voluntary insurance plans cannot be expected to cover more than a fraction of our population. *The Times*

A national health insurance plan, assuring free choice of doctor, professional freedom for the doctor and decentralized administration through the maximum utilization of state and local bodies is necessary in order to bring the benefits of health insurance to all who need it. Voluntary insurance plans could continue under national health in-

surance. National health insurance is opposed to socialized medicine with its attendant evils. *New York, N. Y.*

Credit for the success of the Assembly goes to many groups: to Federal Security Administrator Oscar Ewing for convoking it; to the representatives of the consumer, farm and labor groups and to the American Medical Association.

Enough the fact that the high costs of sickness are now everybody's business — laymen and physicians alike. At

that meeting, over 600 representatives of the medical and allied professions, and of business, labor, farm, church, women's, veterans', cooperatives, and other groups framed a national health program. *Thurs. 5-20-48*

The Assembly further proves that the nation's health concerns all of us: doctors who treat patients, who are responsible for all professional work; the people who foot the bills, responsible for financing and administering the health insurance program.

CHANNING FROTHINGHAM, M. D.,
 Chairman, Committee for the Nation's
 Health. *5-20-48*
 Boston, Mass., May 7, 1948.

Brookings Attack on Health Security

New York, N. Y.

Follows Old Reactionary Pattern

Tues. 5-28-48

The Brookings Institution report attacking compulsory health insurance, released Sunday, is of a piece with most of its recent studies on social issues. Once a great research agency, it has in recent years taken on the aspect of a respectable

institution for special pleaders. The pledge of A.M.A. spokesmen to the safely conservative side. Let a tory Senator or some tory group seek an apparently scientific affirmation of its preconceived viewpoint, and it is quite likely that the Brookings Institution will come up with the right kind of study to buttress that viewpoint. Among the conclusions arrived at by the Institution's scholarly achievements in recent years, the following may be mentioned:

- ¶ It urged repeal of the Federal excess profits tax as a stimulus to economic expansion.
- ¶ It called for a Federal retail sales tax of 10 per cent.
- ¶ It called for curbs on wages (but not on profits) to check inflationary prices.
- ¶ It urged more stringent Federal curbs on labor unions and on strikes.
- ¶ It urged scrapping the National Labor Relations Board, substituting a judicial agency in its place, and prohibiting industry-wide collective bargaining.
- ¶ It urged scrapping the present social security system in favor of a vast public relief program, based on charity and the humiliating means test.

Charity Advocate Wrote

Anti-Health Insurance Report

Tues.

Dr. Lewis Meriam, one of the two researchers who prepared the Brookings Institution study on health insurance at the request of U. S. Senator H. Alexander Smith (R., N. J.), was author of the report advocating the scuttling of the present Federal social security program in favor of a throwback to a public relief system confined to the indigent. His book, *Relief and Social Security*, published in 1946, was widely criticized by outstanding sociologists and economists as out of step with modern progress and strangely lacking in several vital facts concerning current trends in social security. *5-11-48*

Meriam attacked social security as "socialistic," as he had attacked the democratic ideal of progressive income taxation as "Communistic."

It is in the light of this general background that the new Brookings report on health insurance must be evaluated. I am not suggesting that this report, or the previous reports, are dishonest in intent or deliberately falsified in content. I am saying that the research studies of the Institution, including the present one, reflect a definitely conservative bias. *New York, N. Y.*

Many of the arguments presented in the Brook-

ings Institution report on health insurance represent merely the scholarly equivalent of the crude propaganda found in the literature of the American Medical Association and its stooges defending the medical status quo. For instance, it warms up the old chestnut that "the administration of compulsory insurance would require thousands of Government employees for accounting, auditing, and inspection and investigation"—without pointing out that the hundreds of varied voluntary and profit-making insurance schemes now in operation also require thousands of the same. Nor does it mention the significant fact that the present Federal social insurance is administered with impressive efficiency and economy.

Statistics Jim-Crowed; Obvious Truth Denied

The report makes a loaded point by Jim-Crowed its statistics and then denying an obvious truth when it declares:

"Probably no great nation in the world has among its white population better health than prevails in the United States. A few small homogeneous countries, such as New Zealand with respect to its white population, are slightly ahead of the United States as a whole. . . .

"The nonwhites in the United States have materially poorer health than the whites, but the evidence does not indicate that this condition is primarily or even mainly due to inadequacy of medical care." *New York, N. Y.*

It is important to remember, firstly, that the "nonwhite" Americans comprise fully one-tenth the total population. Of course, the social and economic conditions among that disadvantaged tenth have great bearings on the wider prevalence of disease and on the fact that Negroes have an average life expectancy of only 56 years at birth, as compared with 66 years for whites. But it is neither scientific nor ethical to shrug off the monstrous fact of medical discrimination by the statement that "inadequate medical care" is not primarily responsible. *Tues.*

Last week, at the National Health Assembly in Washington, Dr. W. Montague Cobb, professor of anatomy at Howard University, presented a factual and heartbreaking picture of how medical discrimination bars millions of American Negroes from adequate medical care. *5-11-48*

"Discrimination (in health services) is at its worst in the South where the bulk of the Negro population is located," Dr. Cobb observed. "But today in Chicago, the home of the American Medical Assn. and the seat of one of the Nation's great universities, a Negro, Mexican, Filipino or Japanese cannot be admitted to a large majority of the city's voluntary hospitals, and this university was picketed last December in protest against the discriminatory bars of its hospital and its failure in recent years to admit any Negro students to its medical school."

"In many places—in the South particularly—there are no hospital facilities available to Negroes. In tax-supported hospitals, Negro patients are gen-

erally accommodated, but this admission is usually on segregated wards or in segregated institutions. The quality of the segregated accommodations are usually inferior."

Spectre of 'Socialized Medicine' Within AMA Is Raised at Chicago

CHICAGO

With the threat of the Wagner-Murray-Dingell health insurance bill temporarily removed, the American Medical Association now finds itself accused by some of its own affiliates of championing an insidious "socialized medicine" program. High on the agenda of the AMA's policy-making body, the 175-man House of Delegates, which opened its annual meeting here yesterday, is a discussion of the American Red Cross' program for a nation-wide network of blood banks. This program has been officially endorsed by the AMA but repudiated by several state and local affiliates, including the New York State Medical Society—its biggest state affiliate—as a "step toward socialized medicine."

The Red Cross wants to set up civilian blood banks throughout the country, obtaining the blood from volunteers as it did during the war, and distributing it free of charge to any patient needing a transfusion. Such a national program, it is agreed, could save many lives in peacetime and is absolutely essential in anticipation of atomic warfare, when blood transfusions would be needed by the thousands and tens of thousands. The AMA governing body has endorsed the plan, especially as a war-preparation measure. The New York State Medical Society, along with several other affiliates, attack the plan because it would compete with existing commercial and non-profit blood banks and because it offers blood free to everybody, regardless of financial status. If you start giving blood on the basis of need rather than ability to pay, it is argued, it is only a step farther to distribute medical service on the same principle. That, the recalcitrant societies protest, means socialized medicine. The whole issue will be fought out here this week, with a compromise settlement probable.

Dislike Blue Cross, Too

Another hot issue here is the growing antagonism between organized medicine and the Blue Cross, or voluntary hospital insurance plans. For years the American Medical Association and its affiliates have been loudly singing the praises of the Blue Cross in public as an effective alternative to compulsory health insurance under government auspices. Under the surface, however, organized medicine has been conducting a guerilla war against the Blue Cross movement by setting up its own doctor-controlled plans in competition, demanding higher fees for physicians and complaining that too much Blue Cross money was going to the hospitals.

A few months ago the Blue Cross movement was stunned when the AMA announced that it was switching its own hospital and medical insurance for its headquarters employes in Chicago from the local Blue Cross to a commercial insurance company. The Blue Cross people howled loudly that

this act represented a stab in the back. The AMA officials countered that it could not overlook a good business deal with a commercial company because of its sentimental attachment to the Blue Cross.



Deutsch

Dr. Paul R. Hawley, medical director of the veterans administration during the regime of General Omar Bradley, who now heads up the National Association of Blue Cross Plans, is hopping mad over the incident. A tough and honest medical administrator, long known as a blood-and-thunder opponent of socialized medicine, Dr. Hawley has been reading the riot act to the leaders of organized medicine, predicting that the American people will turn en masse to national health insurance within three or four years unless the medical hierarchs abandon their obstructionist policies toward progressive measures.

Warnings from Own Profession

The House of Delegates yesterday heard surgeon General Charles A. Swanson of the U. S. Navy declare that "the advent of new and fantastically more destructive weapons of war makes it mandatory that our ever-deficient wealth of medical care be apportioned most carefully and planned with every caution." Medical preparation for war exigencies has a high priority among the problems being taken up by the AMA annual meeting.

The AMA policy-making body also listened politely but coldly to president Harvey B. Washburn of the American Dental Association as he warned its members, in a brief but bluntly delivered address, that organized medicine's negative policy of opposing all federal plans without offering constructive alternatives could lead only to disaster. Dr. Washburn revealed that President Truman, in a conversation with him yesterday, had bitterly complained about the "arrogance" of medical leaders who consulted him on legislation and had urged more "grass roots" representation in medical leadership.

The House of Delegates will take up a draft for a new AMA constitution later this week. It will also consider, in this context, the proposal of the New York State delegation for a constitutional amendment prohibiting any county society from barring qualified physicians from membership on grounds of race, color or creed.

By Albert Deutsch

AMA Has Come a Long Way on Health Issues During the Past Decade

WASHINGTON

The most impressive fact about the National Health Assembly, which winds up its four-day conference today, is the wide area of agreement between the 800 representatives of organized medicine, dissident physicians' health, labor and consumer interests on elementary principles of the 10-year health program for the nation that they are drafting at the request of Federal Security Administrator Oscar R. Ewing. The only point at which sharp conflict has arisen is the issue of a national compulsory health insurance program.

While the representatives of the American Medical Assn. are as adamant as ever in their opposition to national health insurance, they have come a long way from their last-ditch defense of 19th-century medicine manifested at the last National Health Conference held here in 1938. They have been pushed far by the pressure of enlightened public opinion and the circumstances of the history of the last decade.

The AMA was at best lukewarm about even voluntary (nongovernmental) health insurance plans in 1938 (in 1932 its official organ had referred to such proposals as "socialism and Communism—inciting to revolution"). Today, the AMA is seized by an evangelical fervor for voluntary health insurance as a buttress against the more odious compulsory governmental insurance plan.

The AMA then fought the principle of Federal aid for hospital construction as bitterly as it now opposes national health insurance. Today, the AMA is an all-out supporter of that principle, already written into the laws as the Hill-Burton Act. It now accepts without question, as its representatives participate in this National Health Assembly, many aspects of Federal aid (for medical education, research, maternal and child health services) that it hysterically opposed in 1938. As I observed to Dr. Morris Fishbein yesterday, I expect to live to see the day when I'll write a column headed: "Dr. Fishbein and the AMA Indorse Socialized Medicine."

Group Presents Statement Indorsing Health Insurance

The Assembly so far has been featured by a surprising degree of harmony among all groups represented here on the 14 panels into which the conference has been split. Even the medical care section, where fireworks were expected as the issue of health insurance was discussed, ended its formal sessions yesterday in a round of testimonials on goodwill and the hope of continued co-operation between organized medicine and



Deutsch

labor and consumer groups.

Many labor and consumer delegates, however, felt that the problem of national health insurance had been inadequately discussed. Fifteen delegates yesterday signed a statement urging the section's steering committee to include a recommendation for compulsory national health insurance in its final report to the closing Assembly meeting, today. The statement, introduced by Nelson Cruikshank, welfare director of the American Federation of Labor, comprised these points:

"The principle of contributory health insurance should be the basic method of financing medical care for the large majority of the American people, in order to remove the burden of unpredictable sickness costs, abolish the economic barrier to adequate medical services and avoid the indignities of a means test."

Health insurance should be accompanied by such use of tax funds as may be required to furnish services which are public responsibilities and to assure adequate services for the whole population.

"A national health insurance plan, assuming free choice of doctor, professional freedom for the doctor and decentralized administration through the maximum utilization of state and local bodies, is necessary in order to bring the benefits of health insurance to all who need it. Voluntary insurance plans which provide services and which meet acceptable standards should continue under a national health insurance plan."

Those Who Signed The Statement

Signers of the statement, all delegates to the Assembly's medical care section, included:

Nelson Cruikshank of the AFL, Dr. Channing Frothingham of the Committee for the Nation's Health, Miss Josephine Roche of the United Mine Workers, Murray Robinson of the American Veterans Committee, Miss Helen Hall of the National Federation of Settlements, Miss Elizabeth Magee of the National Consumers League, Dr. Montague Cobb of the National Assn. for the Advancement of Colored People, Harry Becker of the United Auto Workers, Jerry Voorhis of the Co-operative League of America, Miss Gladys Edwards of the National Farmers Union, Dr. Edward L. Young of the Physicians' Committee for the Improvement of Medical Care, and Miss Abraham Epstein of the League for Industrial Democracy.

It is not expected that the steering committee, which has sought to avoid controversial issues, will include the national health insurance proposal in its final report.

Dr. William C. Menninger, president-elect of the American Psychiatric Assn. and chairman of the Assembly's mental health section, introduced a resolution of a general session yesterday urging Congress to ratify the United Nations World

Health Organization, a measure which has been stalled in the House Rules Committee. The motion was enthusiastically received by the delegates, including those representing the AMA, but was ruled out of order by Federal Security Administrator Ewing, who pointed out that a Federal law prohibited Federal agencies from sponsoring meetings acting on specific pending legislation.

By Albert Deutsch

Dr. Boas Presents Arguments For Health Insurance System

WASHINGTON

Top representatives of the American Medical Assn. yesterday engaged in a spirited, though polite, duel with liberal physicians over the Wagner-Murray-Dingell Health Insurance bill at the National Health Assembly session here. The debate was the high point of Sunday's session in the four-day conference of 800 health and medical experts, called by Federal Security Administrator Oscar S. Ewing to draft a 10-year health program for presentation to President Truman.

At a banquet the night before, the 800 delegates had heard Truman renew, by implication, his plea for the early enactment of a national health insurance bill. The plea was made in the course of a rambling, anecdotal speech, delivered without notes, in which the President referred to his special health message to Congress, in November, 1945.

Truman noted that Congress had already adopted part of the program outlined in that message, but declared that the "most vital part of it"—obviously meaning the health insurance recommendation—remained to be voted.

Dr. Boas Proposes, AMA President Opposes

Of the 14 special panels at the National Health Assembly—each dealing with a particular aspect of medical and health problems—the biggest crowd turned out yesterday for the medical care panel, where Dr. Ernst P. Boas of New York, chairman of the Physicians' Forum (a group of some 1000 liberal doctors) championed the principles of national health insurance, while Dr. R. L. Sennich, president of the American Medical Assn., presented the reasons why organized medicine opposes such a system.

Dr. Boas advanced these arguments in favor of a national health insurance system such as is envisaged in the Wagner-Murray-Dingell Bill:

"Adequate medical care for all can be achieved only by means of universal compulsory prepayment insurance. It offers the only system whereby medical care can be furnished according to the medical needs of individual and community, rather than in proportion to their unaided ability

to pay for it. The insurance principle is preferable to 'free medicine' paid for by tax funds, since the individual would then receive medical care as a right, not as a charity."

Because of the uneven distribution of wealth, individually and geographically, the Federal Government rather than the states must assume responsibility for collecting the necessary funds (by payroll deductions from both workers and employers). Some states are unable to support an adequate statewide compulsory health insurance program. Those that could would impose a penalty on their businessmen, who would be paying part of the health insurance tax while their competitors in other states would be free from such payments.

The mere removal of the financial handicap will lead to better and more thorough medicine for the many who today are unable to pay for good medical care. Doctors would remain responsible for controlling the quality of medical care.

Doctor Gets Stake in Health



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insurance program would lead to bureaucratic regimentation and deterioration of medical services.

Dr. Morris Fishbein, editor of the American Medical Assn. Journal, sat silently in the audience as a delegate while the debate progressed, an un-

usual role for this extremely vocal exponent of the
status quo in medicine. *New York, N. Y.*

Meanwhile, participants in other panels were
drafting 10-year programs for maternal and child
health services, mental health, rural health, medi-
cal research, chronic diseases, environmental sani-
tation and other aspects of American physical and
mental fitness. The National Health Assembly
winds up tomorrow after completing programs
that will later be integrated into a 10-year plan
by Federal Security Administrator Ewing. *PM*

Health Insurance Held Too Much for Doctors

The Courier-Journal
Louisville, Ky., May 5-10-48

Washington, May 9 (AP)—There aren't enough physicians to meet all demands likely to be made under a compulsory health-insurance system, a study made for a Senate group said today.

The report was made and issued by the Brookings Institution, a private research organization. It contended:

"Additional requirements imposed upon the present active medical personnel could only lead to deterioration of quality of medical care."

Strides Noted.
This country has made great strides in health conditions, said the study.

It noted that 40 years ago the United States was "completely outclassed" in health by leading nations. Today, health of the white population is ahead of health of larger nations of western Europe, and is "virtually as good" as that of small nations with best records, the study observed. *5-10-48*

Although conditions among Negroes are less favorable than that of whites, this is due primarily to economic and social factors rather than lack of medical care, the report said.

Improvement among Negroes is even greater than among whites, it added. *Louisville, Ky.*

Minor Cares Not Treated.

The report was prepared for the subcommittee on health of the Senate Labor Committee.

"Health surveys show that most illnesses in which medical care was lacking were of a minor nature . . . ordinarily not regarded as requiring a physician," the report said. *Then*

It spoke of the average family's "disinclination" to put medical care ahead of nonessentials. This is "often confused with inability to pay," it added. *5-10-48*

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Charge Propaganda Used Against Health Insurance

Daily World
Atlanta, Ga.
WASHINGTON — (AP)— Condemnation of the National Physicians committee for offering \$3,000 in prize money to cartoonists who publish attacks on the national health insurance plan was registered by Editor and Publisher in a recent editorial and by the Committee for the Nation's Health, Inc., here early this month. *Sat. 4-24-48*

The anti-insurance plan appeared as an advertisement in the Feb. 28 issue of *Editor and Publisher*. It announced 14 "important" awards to "any cartoonist regularly employed by any newspaper or magazine of general distribution or by any syndicated service" who enters an original and "effective portrayal of the meaning and implications of political distribution of health care services in the United States."

Daily World
Contest rules state that entrants must submit 10 copies of the publication in which the cartoon appeared, together with a letter approved by the publisher, and six copies of engravers' proofs of original illustration. It also provides that full permission must be granted by the publisher to reprint cartoons submitted. The contest opened March 1 and closes May 31.

"Bribe" Charged.
Atlanta, Ga.
Pointing out that the contest is "a subtle bribe to cartoonists for doing a propaganda job in behalf of the physicians committee," Editor and Publisher declared editorially: *Sat. 4-24-48*

"The contest rules leave no doubt that this is a subtle bribe to cartoonists to support or oppose certain political beliefs and to obtain general circulation for those beliefs in newspapers and magazines. We classify this contest with those photos in order to qualify for an award. They are all a threat to independent thinking, objective and unbiased reporting and comment in newspapers."

"They offer rewards for doing a slanted job, and it will be difficult for any cartoonist or his editor to deny charges of critics that they were bribed into supporting the though their opinion may have been viewpoint of the committee, even arrived at independently".

Department, based on 1947 population, the Negro tuberculosis death rate in Fulton County is 48.1. The total number of deaths from tuberculosis is 223 and of this number 139 were Negroes. *5-9-48*

It is apparent that early case finding is, therefore, urgent because when the infection does take hold of a tuberculosos victim, it is more likely to run a rapid course in the Negro in the white.

This chest X-ray and blood survey is being initiated by the Atlanta Tuberculosis Association and the Atlanta Health Department, with Mrs. Lucy Cherry and Mrs. Carrie Lou McCarter, respectively, in charge.

The public is invited to come in and take advantage of this free service, just to be sure that tuberculosis does not creep upon anyone.

Treatment Is Ordered For Tutwiler Convicts

Eighty out of the 194 inmates of Tutwiler Women's Prison have venereal disease, State Prison Director Frank Boswell reported Tuesday. *2-4-48*

Boswell's disclosure came in an announcement that penicillin treatments had been ordered for the infected women and also for four of the 24 male convicts quartered at the old Wetumpka prison but assigned to work at Tutwiler.

The treatments will cost the state \$1,500, Boswell added. He said as far as he knew, all the diseased prisoners were infected before entering prison. *2-4-48*

The prison population is made up of 149 Negroes and 45 white women, Boswell said, and 65 Negroes and 15 white inmates showed a positive reaction to syphilis tests. *The Advertiser*

None of the five white men was found to be infected, but four of the 19 Negroes were, the director said. *Montgomery, Ala.*

Blood Tests, Treatment Dooming Dread Syphilis

BY HUGH W. SPARROW
News Staff Writer

MONTGOMERY, Ala., March 13.—After more than three years of continuous warfare, state health authorities are just now proving that syphilis, the crippler and killer, can be stamped out by county-wide blood tests followed by immediate treatment of positive cases. *3-14-48*

Although a few counties are yet to conduct their tests of all persons between 14 and 50, as required under the Henderson act of 1943, one county—Chambers—has been rechecked and the number of positive cases found to have been reduced more than half.

The first county-wide tests were conducted in Chambers County between Nov. 25 and Dec. 7, 1946, according to Dr. W. H. Y. Smith, director of the Health Department's Bureau of Preventive diseases. *Burns 3-14-48*

Exactly 20,255 were given blood tests, Dr. Smith said, and 1,709, or approximately 8.5 per cent, were infected. *Birmingham, Ala.*

Fourteen months later Chambers County was again checked. Between Feb. 23 and March 5 of this year 19,022 persons were tested and in only 753 of the tests were the results positive.

In other words, within 14 months the number of persons suffering from syphilis in Chambers County was reduced from 1,709 to 753. Jefferson's percentage was almost 14.6 per cent greater than Montgom-

ery's. *News*

The percentage of infection in Etowah was only 5.3; in Calhoun, 8.1; Tuscaloosa, 6.3; Madison, 6.5; Colbert, 3.4, and Lauderdale, 2.6.

Among counties with low percentage of infection were Walker with 1.9, Lamar, 1.5; Cleburne, 1.4, and Cullman, 1.4.

The following is the result in the counties tested thus far, listed in the order in which the tests were made: *3-14-48*

County	Persons Tested	Number Positive	Pct. Positive
Wilcox	10,183	1,303	12.9
Sumter	10,426	2,156	17.0
Macon	12,733	1,153	9.0
Lee	17,146	1,831	10.8
Russell	17,116	2,285	13.3
Houston	22,017	2,163	9.4
Dale	9,373	646	6.5
Morgan	24,043	1,445	6.0
Jefferson	271,775	39,733	14.6
Calhoun	39,418	3,198	8.1
Cleburne	4,712	68	1.4
Talladega	28,801	2,055	7.0
Clay	6,718	175	2.1
Etowah	43,173	2,284	5.3
Blount	12,856	266	2.0
Cherokee	7,650	222	2.9
St. Clair	11,026	681	6.2
DeKalb	18,551	315	1.7
Marshall	21,229	485	2.5
Jackson	17,208	349	2.0
Limestone	14,624	957	6.5
Cullman	22,838	323	1.4
Coosa	4,776	321	7.0
Madison	36,942	2,101	6.5
Randolph	11,510	694	6.0
Shelby	10,775	960	9.0
Chilton	12,305	758	6.1
Tallapoosa	12,305	1,307	10.6
Chambers	20,355	1,709	8.5
Autauga	8,399	1,014	12.2
Elmore	12,923	1,032	8.0
Lowndes	7,361	1,182	16.1
Dallas	25,709	4,866	19.0
Bibb	8,478	815	9.7
Perry	9,732	1,190	12.2
Greene	6,642	1,337	20.3
Marengo	13,025	2,231	17.0
Hale	9,141	1,537	16.9
Clarke	12,224	1,257	10.3
Choctaw	8,723	542	6.2
Lamar	9,950	114	1.5
Pickens	12,113	787	6.3
Tuscaloosa	46,492	2,928	6.3
Fayette	9,876	226	2.3
Winston	9,577	66	.068
Montgomery	70,142	7,534	10.7
Marion	12,311	90	.75
Walker	30,308	580	1.9
Franklin	13,502	104	.77
Lawrence	12,393	400	3.3
Colbert	22,782	773	3.4
Lauderdale	24,252	639	2.6
Barbour	14,523	959	6.6
Bullock	6,870	571	8.4
Pike	15,187	1,127	7.5
Henry	8,735	491	5.9
Coffee	14,937	500	3.4
Geneva	12,555	327	2.6
Covington	19,848	543	2.8
Crenshaw	8,828	345	3.9

N.U. FINDS NEW FEVER AGENT TO TREAT SYPHILIS

BY ROY GIBBONS

A new fever producing agent, which seemingly safely burns up a large percentage of the final and most dreaded forms of syphilis, causing mental deterioration and impairment of the central nervous system, has been discovered by research investigators in the

chemistry department of Northwestern university. *TT*

Safe For Elderly Persons

Pyromen, the authors said, has proved equally effective in the treatment of Negroes, who sometimes have been known to be resistant to malaria infection. In addition, the physicians said, the new drug can be given to patients more than 60 years old, as it contains no protein or toxic material.

In another paper read at the meeting, attended by approximately 1,000 physicians from all parts of Illinois, Dr. Dennis B. Dorsey of the pathology department of Augustana hospital, reported that a substance known as cardiolipin, derived from beef hearts, gives more uniform results in Kahn blood tests. *5-12-48*

The fever inducing preparation, which is harvested from laboratory test tubes, resulted in the marked improvement of 19 men and four women who were among 29 patients treated with injections of pyromen alone, the physicians reported. The same chemical used in combination with typhoid vaccine achieved similar improvement in only eight of 19 patients, they said, adding that one patient escaped before his treatment could be evaluated. *5-12-48*

Small Quantities Used

It was possible to discharge 17 of the 29 patients in whom artificial fever was induced from 21 to 38 hours with pyromen injections as compared with the discharge of only 8 of the 19 syphilis victims treated with both pyromen and typhoid vaccine, a report disclosed.

Only minute quantities of the new preparation are required to generate a fever ranging from 103 to 105 degrees and hold it at that temperature during a 30 hour treatment course averaging 4 hours a day, the authors related.

Heretofore, they pointed out, in the treatment of general paresis, frequent in final stages of syphilis, fever machines, rat bite fever, malaria and typhoid fever have been employed to fight the disease. *Daily Tribune*

Discovered By Team

Pyromen, now hailed as a possible successor to these and all previous forms of fever therapy, was discovered by Byron Riegel, Leonard G. Ginger and N.M. Nessel, working as a biochemical research team in the Technological Institute at Northwestern.

"This drug," said Dr. Lonson and Dr. Liebert, "has proved its usefulness in the treatment of neurosyphilis. The results are favorably comparable with those obtained with malaria and typhoid fever treatment. *Chicago Ill.*

"It has the advantage over malaria in that it is less dangerous.

treat venereal disease in patients in other parts of the hospital.

Particularly vital is the cooperation with the obstetrical department and in pediatrics.

Research Conducted

In addition to its regular work the RTC is currently conducting research on a new type of penicillin, PAM (penicillin in oil with aluminum monostearate). The research suggests the possibility that syphilis may someday be successfully treated with one injection instead of two or three injections at five-day intervals.

With the rapid advancement in development of penicillin, fewer patients are hospitalized, and more are treated in doctors' offices or clinics.

Deltas Back Fight On Syphilis

The prevalence of syphilis and gonorrhea among all races in our community has caused all of us great concern.

At the request of Dr. George A. Dennison Health Officer, the Social Hygiene Association was organized in Birmingham to alleviate this situation.

Through Mr. J. L. Williams, Director of Health Education, Birmingham Health Department, Tau Sigma Chapter of Delta Sigma Theta Sorority has accepted the challenge to solicit the active cooperation of every organized Negro group in the campaign.

Ultimately, there will be two paid workers, one white, one Negro, who will carry on a sustained program of public education relative to venereal diseases, their prevention and cure.

This is to be financed through paid subscriptions to the "Social Hygiene News", an official organ of the association. For each subscription of one dollar, the patron not only receives periodically this excellent publication, and adds impetus to a gigantic movement, but he also may get a 1948 Oldsmobile, which every subscriber has equal chance to win.

This is a glorious opportunity for every person in Jefferson County to help himself and his loved ones.

If you want more information or subscriptions, phone, write or visit "Campaign Headquarters at Bradford's Funeral System: Mrs. Marion K. Bradford 1527 7th Avenue, North. Phone 211.

Phone 0 Oliver 813-7-6058, w/ a representative to a Miss Josie M. eet, South, Phone and a representa- zed group with

more information and subscriptions. Don't let this opportunity pass, for you or your organization to share this needed and worth while movement.

On Sunday, November 14, from 5 to 7 at the Federation Day Nursery, Delta Sigma Theta will entertain at a tea all persons who want to know more about the campaign or share it in any way.

By Busload, Syphilis Victims Come For Rapid Treatment

BY WILLIAM KITAY
News Staff Writer

The evening is cool. The patients lounge about outdoors. But the air is tense.

The grounds are quiet. The men and women talk little. But there's a will feeling of expectancy.

Somewhere down the highway, seven buses are headed for the Rapid Treatment Center in Birmingham.

They're enroute from Mobile. Each loaded to capacity. Each in a race for life.

Some 200 men, women and children infected with active syphilis are on their way to a brighter tomorrow.

Suddenly, there's the low murmur of many voices. In a few seconds the buzzing grows to a loud chatter. Hundreds of excited voices. There is no bus in sight. There is no advance word. Nothing but the occasional roar of a low flying plane from the nearby airport.

YET SOMEHOW THESE patients sense the buses with the new arrivals are near. Somehow, they know the vehicles are just rounding Birmingham's Municipal Airport.

The arrival of the buses is a scene that cannot be described. A confused and noisy scene that defies depiction.

Some 250 worried and somewhat apprehensive individuals warmly welcomed by 300 happy and smiling "old-timers."

No person knows another. But there is handshaking. There is backslapping. There is genuine greeting and well-wishing. There is challenge by those who had come days before.

The new arrivals. They are of all ages. Most seem to be in their 20s and early 30s. But there are a good many men and women in their 60s.

THERE ARE MANY CHILDREN. They are from all walks of life. Iliterates. They can't even write their own names.

Then the new arrivals are bedded down on clean sheets for a good night's rest.

TOMORROW BEGINS seven full days of concentrated treatment and education.

There are more than 600 patients now in the former Army barracks on the northern fringe of Birmingham's Municipal Airport. The hospital can care for 925. In an emergency, 1,000.

Of the 600 patients here tonight, 85 per cent are Negro and 15 per cent white. Of the Negroes, 60 per cent are women. Of the whites, 60 per cent are men.

Nearly all the patients are volunteers. They were told they had a deadly disease. They were told it was their lives and the lives of countless other innocent persons. So, they came of their own accord.

ABOUT 1 PER CENT are the quarantined or police cases. Those forced by law to take treatment.

Since the end of the war, the lounge about outdoors. But the air is tense.

They are from all income groups. A few haven't even enough clothes. The hospital well known in his community.

MOST ARE AVERAGE middle class people. Men with average jobs in offices, stores and factories. Now and then a man with a better-than-average paycheck.

They may be poor or have comfortable incomes. They may own homes or rent an acre of ground.

No one asks. No one cares.

The treatment, the food, the shelter and transportation is the same for all. It's all free. It's all provided by the state and federal governments.

"Should they wish to pay, we haven't even any setup for collecting the money," says Dr. William J. Brown, the chief medical officer.

There's a feeling of comradeship among these people. All are victims of a tiny spirochete pallida that will destroy their bodies and their minds.

But one week from tomorrow, a surprising number of infants in their mothers' arms. Some sleeping. Some hungry and crying.

Here and there is a family. A father and mother and their four or five children.

Mobile is having a survey of its population. A mass blood test for venereal disease.

And these are the positives. The men, women and children with active cases of syphilis.

This is the sixth week that the syphilis victims have been coming from Mobile. Four to seven bus loads at a time.

There are all types of people. These same people will be en route to their homes. Treatment completed. Syphilis under control.

There is dinner. Baggage is stored. Valuables are checked.

JURIES, NEGROES AND

Appeal For Hearings in Death Of Negroes Noted By Grand Jury

Birmingham, Ala.
A newly organized Jefferson County Grand Jury has expressed "interest" in the petition by 66 Negro organizations requesting public hearings into the deaths in recent weeks of six Negroes at the hands of law enforcement officers. In a report yesterday to Circuit Judge Robert J. Wheeler, the investigative body commended Solicitor Emmett Perry for his "crystal clear reply" to the petition.

Reporting through its foreman, E. D. LeMay, the Grand Jury expressed its interest "in following to conclusion consideration of the petition if and when the suggestions made by the solicitor as to procedure have been complied with."

SOLICITOR PERRY'S reply to the petition listed three methods by which hearings could be had in the cases named in the petition.

Perry recommended the obtaining of warrants against "any wrongdoer" as being the best method of obtaining public hearings. The other two methods listed were (1) the presenting of evidence which would warrant reopening of a coroner's inquiry, and (2) presenting of evidence before the Grand Jury.

The latter two methods, Perry said, would not result in public hearings, however, since both would be closed to the public.

Perry said last week he has received no reply from the Negro organizations.

Before recessing until Sept. 20, the Grand Jury returned 119 true bills and 16 no bills. It had remained in session five days.

ALBERT SNIDER, 36, Powderly, was indicted on a charge of murder in the fatal shooting of his wife in Birmingham on June 25. 7-17-48

Also indicted were three Walker County white men charged with criminally attacking a 12-year-old Negro girl. Indicted on this charge were Roy Dotson, 41, Linn's Park; Albert Pugh, 28, and Bobby Morgan, 17, both of Sayreton.

To Serve On Jury

ATHENS, Ala. — March 30, A Negro was permitted to sit on a grand jury at the Athens courthouse today for the first time in Limestone County history.

The Negro was Hicks Nelson, a farm owner, who lives west of Athens, two other Negroes were on the petit jury panel for one week. They are outstanding leaders in the Athens Negro community.

First All-Negro Jury Convicts Calif. Laborer

By HERMAN HILL

(By The Courier's California Bureau)

MERCED, Calif.—An all-Negro jury, understood to be the first of its kind in California, and summoned through the inexperience of a deputy, convicted Willie Fisher, 35, a laborer, on one charge of assault with a deadly weapon and acquitted him on a second one here last Thursday.

Jess Hession, chief of the Criminal Division of the Justice Department in Sacramento, averred he was sure there had never before been an all-Negro jury in California.

Other veteran law enforcement officers in the State said they believe this to be the first all-Negro jury in the history of the Nation.

ALL-NEGRO PANEL

The jury was chosen from a panel of twenty-four Negroes and no Caucasians to try Fisher on two counts of assault with a deadly weapon in Judge H. S. Shaffer's court.

Samuel V. Cornell, Chief Deputy District Attorney, explained that Negro jurors are nearly always impaneled for cases which involve other Negroes in Merced.

However, in the Fisher case, Cornell said, the all-Negro group was summoned by an inexperienced deputy who really carried out instructions to include Negroes on the panel. He said the panel was a special one as the regular jury panel had been exhausted.

Cornell declared the case was, to his mind, in a broad sense, an indication of tolerance and equality before the bar of justice.

He said the jury was made up of a cross-section of citizens and included a civil service worker, several farmers and businessmen.

There are several hundred Negroes residing in and around Merced, an agricultural city, midway between Los Angeles and San Francisco. Many of them are employed on cotton farms. A share of these persons migrated from the South during the war.

LAW LAXITY

Recently a group of pioneer Negro residents expressed themselves to a Los Angeles attorney as not being satisfied with an asserted laxity on the part of the law in Merced in criminal cases involving Negroes on both sides.

They claimed local enforcement agencies showed a marked tendency

to underestimate crimes of violence committed by one Negro against another and to mete out trivial punishment.

All Negro Jury Tries Negro; Believed First in Nation

MERCED, CALIF.—An all-Negro jury, believed to be the first in the nation, was chosen in the Superior Court in Merced—where a Negro faces charges of assault with a deadly weapon.

The defendant, Willie Fisher, 35 year-old laborer from South Dos Palos, Calif., allegedly attacked two other Negroes outside a cafe last Nov. 21. Wounded were Columbus Glynn and William Solomon.

The jury convicted the defendant in less than one hour. The defense attorney called the verdict "a compromise." He said the defense would appeal.

The sheriff, who may use his discretion in selecting prospective jurors for a special panel, declined to state why only Negroes were summoned.



ALL-NEGRO JURY—Believed to be the first all-Negro wood Wilson, Coner Love, A. L. Salery, Robert Adams. jury to hear evidence in California, this body is pictured Front: G. W. Jones, J. L. Miles, Bill Williams, Remus taking oath in Superior Court at Merced, Calif. They Jackson, Eddie W. Love and C. Hicks, all of Merced. convicted a Negro defendant on one charge of assault with a deadly weapon and acquitted him on a second one.

Left to right, rear: Walter Burke, John Harvey, Hay-

**First Negro On
Miami Civil Jury**

MIAMI (AP)—A local gardener, Henry Armstead, served on a jury last week in an unlawful detainer action suit to become the first Negro to serve on a Miami civil jury. He was part of a six man jury in Judge David J. Hefferman's court in the case of Mrs. Elizabeth Speleos against Mr. and Mrs. J. Dale Mann. *Sun. 7-18-48*

COUNTY IN FLA. GETS FIRST JURY PANEL OF BOTH RACES

~~one~~ *unreliable* FORT MEYERS, Fla.—In order to comply with a recent Supreme Court ruling that a trial involving colored persons is invalid unless members of that race are on the jury, the names of colored jurors were placed on the panel in Lee County last week. *Ballot box*

**First Negro Serves On
West Palm Beach Jury**

New York, N.Y.

WEST PALM BEACH Fla.—Eton Williams, former school principal and now assistant state service officer for Negro veterans, was chosen for jury duty yesterday, marking the first time in Palm Beach County history that a Negro has sat on a jury. *Sat. 7-24-48*

Mr. Williams was chosen foreman by his fellow jurors, all white, in the hearing of a \$10,000 damage suit. The jury, after deliberating an hour, decided in favor of the defendant.

Miami Plans Negro Jury Panel, More Race Police And End Of Slums

Defender Chicago, Ill.
Sat. 7-10-48

**Negro juror has
police record,
jury disqualified**

MIAMI, Fla. — Three definitely forward looking actions to solve serious problems of the Negro community were reported here last week.

In the first, State's Atty. Glen C. Mincer asked that Negro leaders file with him the name of qualified jurors so that the jury commission could include them on future panels. The development grew out of complaints that law enforcement officers have been too lenient in meting out punishment to Negroes convicted of major criminal offenses.

Hire Negro Police

Concurrently in answer to Miami's mounting crime wave 20 Negro applicants for jobs on the police force were examined by officials of the Police Academy, and will be employed shortly.

It is charged that recently as few as two Negro patrolmen have been detailed to maintain order at night in a community which has an estimated Negro population of 40,000.

The depleted personnel of the Negro police force meant suspending police from night club detail and other such places where crime is apt to originate. Outlying districts of Coconut Grove and Liberty City have been entirely without protection, it is said. A surprise raid on Liberty City two weeks ago netted the police a catch of 36 persons carrying concealed weapons, both knives and revolvers.

Implement Housing Plan

Another step in the right direction here was a meeting of county officials last week to implement plans of the Miami Slum Clearance committee which proposes a housing program to eliminate the Central Negro section's squalid homes.

County Commissioner Douglas Macycin, a member of the zoning board, said that the group cannot set aside areas for Negro housing in face of the U. S. Supreme Court's decision outlawing covenants, but that it was attempting to obtain desirable sites for new homes construction for Negro residents.

Negro property owners, along with white owners of Negro rental property, have pledged to unite for the purpose of replacing the community's hotels. It was disclosed that private capital built 596 units at a cost of \$2,604,000 last year. Three buildings which were the target of the housing committee have been demolished.

Los Angeles
MIAMI — The entire grand jury of Dade county was disqualified here last week when it was discovered that its Negro member had a police record.

H. T. "Red" Rainwater was the second Negro to serve on the grand jury. Rainwater pleaded guilty to two violations of the national prohibition act in 1933 and was sentenced to serve two years in federal penitentiary. His term was commuted after 9 months.

The first Negro grand juror also had a brush with the law. Investigation revealed that Dennis Daniels was once fined \$100 for gambling, and a charge of operating a gambling house dropped for insufficient evidence.

First Negro Juryman

Orlando Daily World
On Florida Circuit

St. Petersburg, Fla. — (SNS) — For the first time in Sarasota's history a Negro served on the Twelfth Judicial Circuit court jury here Wednesday. The juryman was Willie Dasher, a school teacher. The jury on which he served convicted a Negro man of statutory rape involving a Negro girl.

Jurors Named

Orlando Daily World
To Florida Panel

St. Petersburg, Fla. — (ANP) — For the first time in history, Negroes were placed on a Lee County panel last week. The county commissioners were obeying a recent U. S. Supreme Court ruling.

Negro property owners, along with white owners of Negro rental property, have pledged to unite for the purpose of replacing the community's hotels. It was disclosed that private capital built 596 units at a cost of \$2,604,000 last year. Three buildings which were the target of the housing committee have been demolished.

General

Illinois Learns

At Rockford, Ill., Glenn A. Marsh, a 28-year-old farmer who killed Vernon Anderson, husband, and Grant Muhrlein, father of Mrs. Anderson, his paramour, has been acquitted by a jury, even though he confessed the double murder.

All in all it was a sordid story that Marsh told the police after his arrest. He had carried on a long love affair with Mrs. Anderson and when she reneged on her promise to get a divorce and marry him he went to her home, killed her husband and father and then forced her to accompany him on a wild ride through the state.

Marsh was tried for killing the husband and now must, of course, face trial a second time for the murder of Mrs. Anderson's father.

There were those in Illinois who couldn't understand how a Greenville jury in South Carolina could acquit the men accused of participation in the Greenville lynching after most of them had confessed, not to the actual slaying, as Marsh did in Illinois, but to simply going along with the lynching party.

Now Illinois knows that juries may bring some verdicts, fairly and wonderfully made!

First Negro On

Miami Civil Jury

MIAMI—(AP)—A local gardener, Henry Armstead, served on a jury last week in an unlawful detainer action suit to become the first Negro to serve on a Miami civil jury. He was part of a six man jury in Judge David J. Heffernan's court in the case of Mrs. Elizabeth Speers against Mr. and Mrs. J. Dale Mann.

Police Slaying Duet Wins Retrial
Because Of Race Jury Exclusion

WASHINGTON—(AP)—Because the supreme court found that Negroes had been systematically excluded from the jury panel and that the use of a special "blue ribbon" jury violated constitutional rights of the defendants, George Cornelius Moore and Lester Haughton, both of New York, won a stay of execution and a retrial, here last week. The two men had been convicted for the murder of Detective James M. Burke white, member of the Police Honor Legion and holder of eight departmental citations, during a holdup for a New York liquor store on Dec. 13, 1946.

They were convicted of first degree murder last April in Bronx county court, and sentenced to death, a verdict upheld on Nov. 21 by the New York court of appeals. Execution was set for the week beginning Jan. 4, 1948.

A subsequent appeal, which ended in the supreme court, was made on the contention that Negroes had been systematically barred from the jury panel through the use of a special "blue-ribbon jury" method. District Atty. Samuel J. Foley of the Bronx, who prosecuted the pair, said that there had been no unfair exclusion of Negroes from the jury.

However, Atty. John V. Wilkinson, for the defense, recalled that he had raised the question of the barring of Negroes at the original trial but that the trial had proceeded without any change being made. He revealed that Negroes were among the special 800 jurors called but said it was just a chance that Negroes were not in the final panel.

Serves on High Jury



Leake Clinton, of the technical staff of the Bureau of Internal Revenue, was called to sit on New York's Supreme Court grand jury, selected to hear and render decision on one of the top labor cases on the New York docket this month. All other jurors were white. Clinton, an accountant who graduated from Clifton College, Orangeburg, S.C., is one of two colored persons employed in his division at the Internal Revenue Bureau, where he has been for more than 10 years. Active in community affairs, he is a member of Abyssinian Baptist Church and an associate teacher of the men's Bible class at the church. (AP)

Judge Turns Down
All-White Jury

CARTHAGE, Miss. (NNPA)—Circuit Judge Percy M. Lee, justice-elect to the Mississippi Supreme Court bench, last Thursday declined to accept a jury because no colored persons were included in the list of Leake county veniremen from which the panel was chosen.

It was the first time in the county's history that such a ruling had

been made. Judge Lee sustained a motion by Frank Mize, attorney for Hartness Flowers, on trial on a charge of assault and battery with intent to kill, asking that the jury be rejected.

High Court's Edict Basis

Judge Lee denied the attorney's motion that the indictment against his client be dropped, on the ground that no colored persons served on the grand jury, saying that other irregularities had contributed to his ruling against the all-white jury.

The jurist based his ruling on a recent U.S. Supreme Court ruling handed down in the case of Eddie

Ga. Negroes Serve
On Federal Jury

ROME, Ga.—(AP)—Two Negroes were members of a history-making Federal jury which found three men guilty of taking part in illegal whisky deals, thus breaking a backwoods bootleg whisky ring here last week.

Included among the guilty were a sheriff, A. N. Glenn of Chattooga County, and State Representative Ed Knight of Gilmer County, both convicted of accepting bribes from the whisky ring. The trial was held in the U. S. District Court with Judge Robert L. Russell presiding.

ST. LOUIS—Eleven white men last week elected a Negro woman foreman of the Circuit Court jury on which they were serving. Election of Mrs. Albinas Burgett, 407 S. Jefferson, was marked the first time a Negro woman has served in this capacity since women were first allowed on juries here two years ago.



SOLOMON JOHNSON, president of the Civic Betterment League of Orange County, Tex., recently became the first Negro in 50 years to be named to the panel for grand jury service in September. He also announced that eight Negro deputy sheriffs have been appointed to serve in emergencies.

Mississippians On

Lauderdale Jury
MURKIN, Miss. (AP)—For the first time since reconstruction days, the Lauderdale county jury box will include Negroes, it was start service on June 29. 6-18-48

The ban against all-white juries was ordered by County Atty. J. V. Gipson, in line with a supreme court decision giving a Negro, convicted of murder by an all-white

jury, a new trial.

Negro On Texas
Oklahoma
Grand Jury
Black—Disputed

Mrs. L. A. Isaac, 522 North Laird, who has just returned from a business trip to Gilmer, Texas, states she was utterly astonished to discover a very able young Negro of that community selected to

serve on the grand jury at Gladewater, Texas. Sat. 5-15-48 Rev. J. M. Floyd, the young man in question, is the president of the Gladewater branch of the NAACP, in the Red Rock community. He

is the first Negro to serve on the jury in Upshur county.

Whites Name Negro
Woman Jury Foreman

CHICAGO—Eleven white men last week elected a Negro woman foreman of the Circuit Court jury on which they were serving. Election of Mrs. Albinas Burgett, 407 S. Jefferson, was marked the first time a Negro woman has served in this capacity since women were first allowed on juries here two years ago.

RACE SUPREMATIC HIT:

Alfre American **Fears Women on Juries Means Social Equality**

RICHMOND—The Hitlerian myth of "white supremacy" was resurrected and its proponent got a tongue-lashing during a hearing on the bill to permit women to serve on juries Monday in the Virginia General Assembly.

Labeling herself as a believer in "white supremacy," Mrs. Alice of Business and Professional Women's Clubs, who presented the general Laws Committee and Senate bill, asked Mrs. Stryker Courts of Justice Committee to whether she represented any organization.

better still, pass a bill to shoo all the 'ladies' back to their homes." She replied that she represented "myself and the gentlewomen of

Virginia."

Declaring that passage of the women's jury bill would mean the "end of white supremacy," Mrs. Pollard asserted that she wouldn't want to "be locked up in a room" with colored persons or other unsavory characters of the type who frequent courtrooms.

"You wouldn't want your wives and daughters associating with the unsavory characters who are brought into courtrooms," Mrs. Stryker told the committee members, "You know you wouldn't."

"Outraged" and "shocked," not only at the woman making such a derogatory statement about colored citizens but at its going unchallenged by the lawmakers who are "supposed to represent all of the people, colored and white," Mrs. Alice Burke rose to her feet.

Mrs. Burke, secretary of the Virginia Communist Party, declared: "That is the Hitler theory of race superiority. I did not intend to speak on this bill, but couldn't sit idly by and let the lady, who cloaks herself in Scripture, attack our colored citizens."

Rebukes Committee

Mrs. Burke told the committee members that she was "surprised" that no one of them had risen in defense of this one-third of the population of Virginia.

She called to the attention of the lawmakers the fact that the Bill of Rights was first adopted by Virginia assemblymen and later incorporated in the Constitution of the United States and their duty to guard zealously those traditions of human freedom and equality.

Slated for State Post

Mrs. Pollard, the avowed staunch believer in white supremacy, is slated to become executive secretary of a proposed science museum to be set up by the State. She was the lone opponent of the bill.

Mrs. Nina Horton Avery, nation-

Negro Declines Offer To Serve On Walton Jury

MONROE, Ga.—(SNS)—Offered the precedent snattering opportunity of being perhaps the first Negro to serve on a Walton county jury, W. H. Williams, a local undertaker, declined the offer Monday with the explanation that he had a pressing funeral to attend.

Had Williams accepted the opportunity, he would have been a prospective juror among those to try the case of Isaiah Grimes, 27-year-old World War II veteran accused of burning a school and two churches in Loganville, Ga., last February. The defendant's trial is slated to open on next Monday.

The accusation of Grimes skyrocketed into heated dispute when some claimed that whites had burned the buildings and attempted to place the blame on a Negro.

On the heels of an announcement by law officers that Grimes had confessed the alleged crimes, the World was smuggled a letter from the accused, denying the charge.

A previous scheduled trial for Grimes was delayed when his fiery attorney, Dan Duke, protested against it on the grounds that Negroes were excluded from the Traverse jury.

A reliable source disclosed that although a body was at the William's Funeral home on Monday, no trace of a funeral could be established.

Negroes on Walton Jury List For First Time in History

Constitution State News Service.

MONROE, Aug. 12—For the first time in history Negroes are on the jury list subject to be drawn for jury duty in Walton County next week.

The jury list was recently re-vised to includ Negroes in an trial until the Traverse Jury list was delayed the challenge came too late to the list in the case of Isaiah change the Grand Jury list. Grimes, a Negro, was accused of burning a Negro school-in any case next week depends house and church last February upon whether his name is drawn from the box, and whether either Duke protested the trial on the grounds that no Negroes were in the prosecuting or defense attorney's strike the Negroes' names.

Georgia Attorney Calls

Georgia

Atlanta, Ga.—(G)—Dan Duke, a white attorney of this city and former solicitor-general of the State of Georgia, has made a motion to compel his state to place Negroes on juries.

In his motion he stated that, no Negroes had been placed on juries in twenty years. He said: "We in Georgia must accept the law as it is legally interpreted by the U. S. Supreme Court. Today, in Georgia there are 120 counties that have legally qualified Negro citizens eligible for jury service, which do not have the names of any Negroes in their grand jury or trial jury boxes. This simply means that any indictment for a felony returnable by a grand jury in these counties against a Negro is fatally defective. Whether we like it or not, it is the law, and we claim to be law abiding people."

Precedent Set

Ga. Court Throws Out All-White Jury Panels

MONROE, Ga.—In a precedent-setting court case last week, Superior Court Judge Henry West of Walton ruled that four panels of white jurors called for the current term of court not to take up the case of Isaiah Grimes, young farmer accused of arson and murder, because of exclusion of Negroes from jury service.

The trial was postponed until the August term of the court.

Judge West denied the motion by Atty. Daniel Duke to quash the indictments against Grimes. Mr.

Duke is the famed Klan prosecutor and former assistant attorney general in Atlanta.

The setting of Judge West's ruling was in a packed Walton County courtroom. Duke challenged the Walton jury system, stating in his petition that Walton County has 710 names of Negroes on its tax books, but has had no Negroes on grand or petit juries for more than twenty years.

CITES CONSTITUTION

His motion was based on the U. S. Supreme Court ruling that exclusion of Negroes from juries because of their race is unconstitutional.

Grimes was arrested after a search for the person or persons

Negroes in Loganville claim that a concerted attempt to move them from their desirable community location on a new highway may have led to the burnings of their community gathering places.

New York, N.Y. ATLANTA.—The vicious Jimcrow jury system stands exposed in Georgia today as a mainstay of lynching and lynch-rule. This fact was publicly recognized by the 90 white and Negro Georgians who participated in the Georgia Wallace for President Conference in Macon on Feb. 21. The conference not only voted to call on Gov. Thompson and President Truman to intervene on behalf of Mrs. Rosa Lee Ingram and her two sons, sentenced to die in the electric chair, but pledged to work for the complete abolition of Jimcrow juries as an instrument for legal lynching and for continued brutal oppression of Negro citizens in Georgia.

It was an all-white jury, with Negroes excluded, which sentenced Mrs. Ingram, Mr. Dykes, state-appointed defense counsel, said that a white defendant would have been freed immediately on plea of self-defense. *The Worker*

★
IT WAS AN ALL-WHITE JURY which refused to return indictments against the warden and guards of the Brunswick prison camp where eight Negro prisoners were massacred. The same situation was repeated in Walton County when an all-white jury found no grounds for indictment of members of the mob which lynched two Negro men and their "wives" in July, 1946.

The unlawful Jimcrow jury set up in Walton County has come back into the spotlight recently. Attorney Dan Duke, former assistant attorney general under Gov. Arnall, asked the Walton County Superior Court to dismiss a suit against Isaiah Grimes, Negro citizen accused of arson and murder, on the grounds that no Negroes were allowed to serve on the jury.

New York, N.Y. The guilty of the burning last fall of two Negro churches and a school-house in Monroe, scene of the 1946 lynching, has by no means been established. It is believed that Grimes is being victimized by certain whites in the community, who want to get possession of the Negro property through which a proposed highway is to be cut, and also that the arson was part of a campaign to intimidate Negro voters in that section. *Mar. 3-7-48*

Duke stated that, though there are 710 names of Negro citizens on the tax books in Walton County, no Negro has served on a grand jury or trial jury for the last 20 years.

"Today in Georgia there are 120

South, which had gone unchallenged for many years. The Federal Supreme Court ruled in the Scottsboro case that the exclusion of Negroes from grand and trial juries is a violation of the equal protection clause of the 14th Amendment to the Constitution. *Mar. 3-7-48*

The legal basis for today's fight against the Jimcrow jury system grew out of civil rights struggles of the 1930's. It will take a similar struggle of the people to free Mrs. Ingram, and to drive this illegal oppressive system out of the courts.

Negro Veniremen

Daily World **Up For Service**

Atlanta, Ga.

Included among the veniremen called for duty in Fulton Civil Courts for this week is a panel comprising four Negroes. Three were impaneled for duty Wednesday in the Criminal Division.

The veniremen include Oswald H. Freeman, J. D. Ricks, Roosevelt Jackson and J. R. Wilson, Sr.

Rules Jury Must Include Negroes

MONROE, Ga.—Superior Judge Henry H. West of Athens postponed the trial of Isaiah Grimes until August because no Negroes were included in the four jury panels that were to try Grimes last week.

Grimes has been accused of burning his stepfather to death, and of burning two Negro churches and a Negro school in Loganville. *Mar. 3-7-48*

Two weeks ago the trial of Willie McGee was postponed until a Negro was named to serve on the grand jury. McGee was accused of raping a white woman.

Dan Duke, defense counsel for Grimes, hailed the decision of Judge West as the first break with "an old Southern custom of wilfully excluding qualified Negroes from juries trying members of their race".

Negroes And The Jury

Superior Court Judge Henry West, in sustaining counsel's objection to the trial of Isaiah Grimes in Walton County Monday on the grounds that there were no Negroes on the jury panels, has set a precedent destined to have a wholesome and far-reaching effect in the courts of Georgia. In his petition to quash indictments returned against Grimes by an all-white Grand Jury, Attorney Daniel Duke showed that Negroes constitute 32 per cent of the population; that there are 710 names of Negroes who are on the books by Tax Commissioner, but none in the jury boxes.

That, Attorney Duke contended, is discrimination because of race and color and therefore violative of the rights and privileges of the 14th Amendment and the U. S. Constitution. Commenting on the petition, Mr. Duke said:

"We in Georgia must accept the law as it is interpreted by the United States Supreme Court. Today in Georgia there are 120 counties that have legally qualified Negro citizens eligible for jury service that do not have the names of any Negroes in their Grand or petit jury boxes, Walton county being one of them. This simply means that any indictment for felony returned by a Grand jury in these counties against a Negro is fatally defective."

Mr. Duke could have added that in those few counties in the state which pretend to carry the names of Negroes in their jury boxes that they are listed separately on paper of one color for whites and another for Negroes, in itself discrimination for the same reason of race and color.

The victory we think is a splendid one. Judge West has set the precedent now. It should therefore be easy for other

counties over the state to begin now to add the names of Negroes to make the law genuinely murder, by an all-white jury. We believe his motion will be sustained.

Attorney Duke contended, although his motion to

determine the fate of the accused on trial.
Attorney Duke has indicated, that he intends to appeal the objection and thus continue the campaign to have Grimes released.

Mississippi Senate news Passes Bill Allowing Women To Be Jurors

JACKSON, Miss., Feb. 18—(AP)—The Mississippi Senate passed a bill yesterday allowing women to serve on juries.

Passage, on a 25 to 17 vote, came despite warnings of opponents that the bill might make it necessary for women to serve with Negroes on the juries.

After passage, however, the Senate held the bill for reconsideration.

Sen. B. H. Loving urged that the bill be killed on the grounds that recent United States Supreme Court decisions "say no Negro can be convicted and the conviction stand unless there are Negroes on the jury."

"That," he said, "means that the women of Mississippi would have to serve with Negroes.

"God forbid that the day will come in Mississippi when white women sit on a jury with a black buck Negro."

Prohibition and the black market tax will get their first tests in the Legislature today.

The House will take up the Price-Ross bill designed to give each county a chance to vote on the prohibition law. Under the bill the state would install its own stores in those counties which voted "wet."

Mississippi Negroes Sworn On Grand Jury

LAUREL, Miss., Feb. 17—(AP)—The first Negroes to serve on a Jones County, Miss., Grand Jury were sworn in yesterday.

Three of them joined 15 white men on a jury to hear the case of Willie McGee, Negro twice convicted and sentenced to die for the rape of a white woman.

McGee's indictment was quashed by the State Supreme Court last week on the ground that no Negroes served on the Grand Jury which made the charge.

Sworn in yesterday were Dr. T. J. Barnes, T. D. Brown and Claude Arrington.

Negro Bill Advances

JACKSON, Miss., Feb. 18—(AP)—A bill to allow women to serve on juries passed the Mississippi Senate today by a vote of 25 to 17. Passage came despite warnings the bill might cause white women to serve on juries with Negroes.

Lauderdale supervisors did not comment today on the report that Negroes' names had been included in the jury lists, but in a previous statement the board's attorney, J. V. Gipson, declared that the supervisors must by law place Negroes' names in the jury boxes.

Ruling For Negroes
On Jury Poses Test

LAUREL, Miss., Feb. 11—(AP)

Difficulty in satisfying a Supreme Court requirement of Negro jurors in Negro trials has been forecast by Jones County officials.

Their comment came as preparations went ahead to seek a new indictment of Negro Willie McGee for the rape of a prominent Laurel white woman last year. McGee has twice been convicted and sentenced to die but on both occasions the Supreme Court has reversed the convictions.

The first reversal came when the court ruled McGee should not have been tried in Jones County, where feeling ran high over the crime.

The second came Monday when the court quashed the original indictment because no Negroes were on the Grand Jury which returned the true bill.

Circuit Court Clerk Lonnie Meador pointed out yesterday that there are only about 100 Negroes qualified for jury duty in the county and that it would be impossible to assure a Negro member of every jury empaneled.

Negroes For Jury

MERIDIAN, Miss., June 10—(AP)—The Lauderdale County jury box will contain the names of Negroes on June 29 for the first time since reconstruction days.

The move was ordered after County Atty. J. V. Gipson ruled it was mandatory under a recent Supreme Court decision giving Eddie Patton—Negro convicted of murder by an all-white jury—a new trial.

REPORT NEGROES ON JURORS' LISTS

(Special to The Times-Picayune)

Meridian, Miss., June 30.—The Lauderdale county board of supervisors Tuesday drew up new lists for prospective jury duty and it was reported that Negroes were included for the first time since Reconstruction.

The action followed the United States supreme court's reversal in December of the conviction of Eddie "Buster" Patton, Negro, for the alleged slaying of James Meadows, a Meridian night club owner. The supreme court reversed and remanded the death sentence of Patton because there was no Negro on the Lauderdale county jury which convicted him.

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7-1-48

Mississippi

Mississippi Atty. Gen. Greek L. Rice, commenting on the supreme court's ruling in December, said, "It will be necessary for the board of supervisors, in making up the jury list of the county and placing the names in the jury box, to select some proportion of Negroes for jury service."

Three Named

To Mississippi

Grand Jury

LAUREL, Miss.—Dr. T. J. Barnes, Claude Arrington and T. D. Brown will be the first Negroes to act as members of a Jones County Grand Jury.

The case up for consideration is that of Willie McGee, twice convicted and sentenced to die for rape of a white woman. The sentence however was suspended by the Mississippi Supreme Court on the grounds that no Negroes served on the grand jury which made the charge.

On previous rare occasions names of Negroes have been drawn for county grand jury service but their wish to be excused has always been granted.

Negroes however, have served on Federal Court juries in Jones County.

Judge Declines To Accept An All-White Jury

By NNPA News Service

CARTHAGE, Miss.—Circuit Judge Percy M. Lee, justice-elect to the Mississippi Supreme Court bench, last week declined to accept a jury because no colored persons were included in the list of Leake county veniremen from which the panel was chosen.

It was the first time in Leake county history that such a ruling had been made. Judge Lee sustained a motion by the defense attorney for Hartness Flowers, on trial on a charge of assault and battery with intent to kill, which had asked that Judge Lee refuse to accept the jury.

The attorney, Frank Mize, of Forest, then entered a motion that the indictment against his

client be dropped on the grounds that no colored persons served on the grand jury but Judge Lee overruled that motion, saying that other irregularities had contributed to his ruling against the all-white jury.

Judge Lee based his ruling on a recent United States Supreme Court ruling handed down in the case of Eddie Matton, of Meridian, whose conviction on a murder charge was reversed by that tribunal.

The charge in the present trial which was delayed by the ruling, is that Flowers and other colored persons fired on a car occupied by several white men, which resulted in the wounding of William Dickens, of Carthage

Fear No Negroes

Qualified To

Serve On Juries

LAUREL, Miss.—(NNPA)—Jones County officials are saying they will have a difficult time finding colored persons to serve on juries in order to meet the requirement of the recent decision of the Mississippi Supreme Court.

Their dismay became known as they prepared to seek a new indictment against Willie McGee for the alleged rape of a Laurel white woman in 1945. He has been twice convicted and sentenced to die but both convictions were reversed by the Mississippi Supreme Court.

The first reversal came when the court ruled that McGee should not have been tried in Jones County

where feeling ran high over the alleged crime. The second came February 9 when the court quashed the original indictment because no colored persons served on the grand jury which indicted him.

The veniremen have been described by their white fellow-jurors as only about 100 colored persons as "all right." One of the whites qualified for jury duty in the county said the Negro jurymen are "high type" men.

Circuit Court Clerk Lonnie Meador claimed last Tuesday that the Negroes serving on the grand jury were "all right." One of the whites qualified for jury duty in the county said the Negro jurymen are "high type" men.

Patton, a Negro, had been convicted and sentenced to death for the self-defense slaying of a white tavern operator near Meridian. The Supreme Court overruled the verdict and sent the case back to State courts, primarily on the point that no Negroes served on the juries which indicted and tried him.

The three Negroes serving on the present grand jury are Lemon White, farmer; A. L. Fielder, druggist, and Henry Strayhorn, mortician.

He is A. J. Latham of the Kewanee community.

The action was forced upon county officials to prevent the voiding of indictments and convictions in capital cases involving Negro defendants, in view of a recent U. S. Supreme Court decision in the Buster Patton case from Lauderdale county.

7-17-48

The nation's high court reversed and remanded for new trial the case of Patton, a Negro, who had been sentenced to death for the self-defense killing of a white man, on the ground that Negroes were systematically barred from juries in Lauderdale county.

Three Negroes On Meridian, Miss., Jury

LAUREL, Miss.—(NNPA)—Bigoted Mississippians steeped in the antiquated "traditions" of the old South, flagrantly kept Negroes off juries in Lauderdale County until the United States Supreme Court's "Buster" Patton case decision last December.

The ruling forced whites here to include Negroes as a component part of the jury system.

Now three Negroes are serving on the grand jury for the August criminal term of the Lauderdale Circuit Court—the first to serve on that body in more than fifty years—and nothing unusual has happened.

HIGH-TYPE JURORS

The nightmarish pictures of "social equality" and such other nonsense drawn by the rabble-rousing Dixie political demagogues and cheap news sheets have failed to materialize.

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**Woman Becomes
First Negro On
Queens Jury**

LONG ISLAND CITY, N. Y. (AP) — A woman, Mrs. Jessie W. Routte of South Jamaica, became the first Negro to serve on a Queens County grand jury, last week. Her husband recently received public attention for touring the south and being admitted to many functions without prejudice because he wore a turban.

**Woman Named
On Grand Jury**

JAMAICA, N. Y. — Mrs. Jessie W. Routte, who was sworn in by Judge Peter T. Farrell as a member of the March Queens Grand Jury last week, is not only the first Negro woman to serve on a Queens Grand Jury, but was elected assistant foreman by her fellow veniremen.

Edward F. Murphy of Jackson Heights was elected foreman.

Mrs. Routte, wife of a Lutheran minister, and an official of the Jamaica Branch, NAACP, is active in the civic and business life of her community. A real estate broker with offices in St. Albans, she is also a member of the Jamaica Chamber of Commerce.

A graduate of Fordham University School of Sociology and Social Work, Columbia University School of Science, and New York University School of Business Administration, Mrs. Routte holds a law-qualifying certificate from the State Supreme Court.

She is chairman of the legal redress committee of her branch of the NAACP, is a member of the board of directors of the Jamaica Council of Church Women, second vice president of the Intercommunity Civic League, a member of the Women's Grand Jurors Association, and an executive of the Merrick Community Center.

Mrs. Routte is also the mother of four children. Her husband, Rev. Jesse W. Routte, is pastor Holy Trinity Church. The family lives at 111-45 167th st.

**Dessaure Case
In Appeal Court**

Of New York

NEW YORK, N. Y. — (NNPA) — The Court of Appeals of New York will decide next June whether or not the failure of Nassau county to select colored people for the jury which convicted William J. Dessaure, a colored minister, of assault on a policeman, violated his constitutional rights.

Associate Justice Stanley H. Fuld sent the case to the Court of Appeals last Thursday after his examination had convinced him that the case raised sufficient questions of law.

Stanley Faulkner, attorney for Dessaure, told NNPA that he is prepared to fight the case all the way to the Supreme Court even though Nassau county has now begun to use colored jurors.

Dessaure was charged and indicted on four counts of hitting two policemen and resisting arrest by two policemen in June, 1946. When the case reached trial court, Faulkner made a motion that the indictments be vacated on the grounds that colored people are systematically excluded from jury duty in Nassau county.

On Dec. 30, 1946, the court held that it had not found that colored people were systematically excluded from the jury but that it took judicial notice that no colored people had served on the jury in Nassau county. Then in January of 1947 two colored jurors were placed on jury duty in Nassau county.

On May 3, 1947, an all white

jury acquitted Dessaure of the counts of resisting arrest but disagreed on the two counts involving assault. At the suggestion of the district attorney the judge sent the jury back and when they returned a second time they had found Dessaure guilty of assault on one count.

The case then went to the appellate division of the Supreme Court, which affirmed the decision on April 26, 1948.

It was then submitted to Judge Fuld, who decided to forward it to the Court of Appeals. Judge Fuld was a member of the district attorney's office of New York county when Governor Thomas E. Dewey was district attorney. Dessaure, who was sentenced to one and a half to three years in jail, has been free on \$5,000 bail.

I. F. STONE

Nine-Negro Jury in Jim Crow City

WASHINGTON

An odd sidelight on this Jim Crow capital is provided by the case of Carl Marzani on which the U. S. Supreme Court split 4-4 last Monday. This former State Department employe, fighting a conviction for falsely denying that he

had been a Communist, was tried by

the most extraordinary jury in the history of the Federal District of Columbia. The jury contained nine Negroes.

Negro members of the local bar tell me there are often one or two Negroes on juries here, but a jury with nine was something hitherto unheard of. It turned out that the three witnesses against Marzani were all Negroes, the principal one being a Negro policeman who served as

spy and (by his own admission) agent provocateur for the New York City red squad.

In this town an all-white jury might have been as unimpressed as the Civil Service Commission seems to have been by the reports of the Negro police spy who was the star witness against Marzani.

For these same allegations from this same source figured in Marzani's original investigation by the FBI and final clearance by the Civil Service Commission five years ago.

On the other hand certain lines of cross-examination were sharply curtailed by the trial judge lest it prejudice a predominantly negro jury in Marzani's favor.

For example: the defense naturally sought to attack the reliability of the chief prosecution witness. It was never permitted to explore before the jury on cross-examination the motivations and mind of the policeman who, sent out to spy on his own people, organized a branch of the National Negro Congress in order to draw in and then report on other Negroes for "subversive" activity which he himself had stimulated.

Negro Heads Bronx Jury

Housewife First of Race Chosen

Foreman in Criminal Case

For the first time in the history of Bronx County Court a Negro was chosen foreman of a criminal case jury yesterday. The jury foreman is Mrs. Susie Haskins, a housewife, of 1184 Tinton Avenue,

the Bronx, selected for the trial but split 5-4. Justices Jackson, Frankfurt, Adolph Abramowitz, thirty-nine, Douglas and Murphy dissented. "In

federal courts, over which we have supervisory power, sitting almost within a stone's throw of where we sit," Jackson wrote for the dissenters, "a system is in N. J. The complainant in the case operation which has produced and is likely and first witness, was David Hochberg, a relative of the defendant, again and again to produce what disinterested persons are likely to regard as a picked jury."

If Marzani were a person of wealth or prominence instead of an obscure victim of hysteria, the kind of jury he got might lead to a congressional inquiry. The cards

New York, N. Y. Abramowitz is an attorney of 8015 Third Avenue, North Bergen, N. J. The complainant in the case operation which has produced and is likely and first witness, was David Hochberg, a relative of the defendant, again and again to produce what disinterested persons are likely to regard as a picked jury."

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'Blue Ribbon'

Jury Review

Atlanta, Ga.

WASHINGTON, D. C.—(NNPA)—The United States Supreme Court agreed last Monday to pass on the legality of the New York "blue ribbon" jury system, which is under attack on the ground that colored persons are systematically excluded from panels from which such juries are drawn.

The high tribunal decided to review the conviction of George Cornelius Moore and Lester Haughton, who were sentenced to death for the murder of Detective James M. Burke, December 13, 1946, in a Bronx liquor store.

Electrocution of the two men, set for the week of January 5, 1948, was stayed by the high court until final disposition of the case.

Counsel for Moore and Haughton contend that their trial and conviction by a special jury denied them their rights under the Fourteenth Amendment to the Federal Constitution, and that colored persons were systematically, and deliberately excluded from the closely screened panels designed to provide high-caliber juries for big cases.

In New York City the Bronx District Attorney's office said last Monday it would be pointed out that there were colored persons on the panel although none was drawn on the trial jury.

1-3-18

Negroes Serving On Jury, First

Atlanta Daily World

Time Probably In Half Century

Tues 12-19-48

CHATTANOOGA, Tenn. (SNS) — Two Negroes actually heard evidence as members of a jury in criminal court here Tuesday, December 7, 1948. *Atlanta Ga*

The first such happening in the memory of experienced lawyers and court officials here immediately gave rise to the question of how much of a precedent had thus been set in Hamilton County courts.

Some observers called the occurrence "an accident" which would not likely become regular practice. Others expressed belief that the way had been opened for at least partial acceptance of Negroes as actual jurymen.

The two jurors were Arthur J. ary.

The defendant was accused of breaking into the house of his great aunt, Maude Davis at 739 E Ninth St., on October 5. He allegedly took a fur coat and a table-model radio valued at a total of \$200 and pawned Presley, Route 2, Plumwood Drive,

a tailor, and James C. Jordan, 1712 West 26th St., an employee of Standard-Coosa-Thatcher Company.

ONE OF THE FOUR NEW JURIES

They were part of Jury Number 1 which with three other new juries were empaneled Tuesday morning by Circuit Judge Fred Ballard.

Called into the jury box to serve in the case of Curtiss Bowen, 23, a Negro charged with burglary, they were reported as satisfactory to both the state, represented by Assistant Attorney General John L. Lively, and the defense counsel, for whom was Lawrence C. Loy.

Gen. Lively recalled several times during his almost 50 years' practice here that Negroes have been summoned and even placed in the jury box. They were always excused by either the state or defense, he said.

Judge Schoolfield said he had known of no Negro actually serving in the 22 years he has practiced law.

Circuit Court Clerk Zelma F. Sherrill reported unusual reaction to a call by Judge Ballard yesterday for "volunteers" among prospective jurors who saw no other reason why they should not serve.

Thirty-seven immediately offered their names, she said. Not since depression days has there been such response, she said.

The 54-man panel selected, included four full juries and six extra veniremen.

The jury found Bowen guilty of receiving and concealing stolen property in the case and sentenced him to not more than 10 nor less than three years in the penitentiary them at a local loan office.

Bowen denied the burglary and said a friend identified as "Babe" a coworker at the Crane Emaneling Company had given him the property.

Criminal Judge Raulston Schoolfield, who heard the case in criminal court, excused Jury number 1 shortly before noon, until 9 o'clock Wednesday, because it was no longer needed.

Judge Schoolfield before the present grand jury was empaneled in September, directed the Hamilton County jury commission to subpoena a "proportionate number" of Negroes for grand jury service. Two appeared in court, but asked to be excused.

Several local attorneys have ~~Tues 12-19-48~~ carried criminal court arguments charging systematic exclusion of Colored jurors to the higher courts. Maurice Weaver obtained a rehearing of burglary and rape charges against a client on those grounds several months ago.

The case was recommitted to the grand jury and indictments returned after Judge Schoolfield and the state furnished proof Negroes had been summoned for jury service.

Another Negro, Fred Holmes, 2917 Williams St., is a member of the new jury panel, but has not yet served.

2 Negro Jurors

Atlanta Daily World
In Tenn. Court

CHATTANOOGA, Tenn. — Negro jury members served in a Hamilton County court Wednesday for the first time in the memory of veteran courthouse observers.

Two Negroes were included on a jury which convicted another Negro on a burglary charge.

Criminal Court Judge Raulston Schoolfield said that in twenty-two years of law practice here he could not remember Negroes being called for actual jury service before.

Negro Undertaker**First To Serve On
The Informer and Texas
Nacogdoches Jury***Freeman 2-7-48*

NACOGDOCHES.—Sid Roberts prominent undertaker, has been selected for the current grand jury in Nacogdoches county, being the first Negro to serve on the grand jury in Nacogdoches county. *San Antonio, Texas*

He is a member of the Boosters' club, which has been doing fine things in Nacogdoches county. *Sat. 2-7-48*